

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Allstate Insurance Company PAC

ADDRESS (number and street)

2775 Sanders Road Suite A5

☐Check if different
than previously
reported. (ACC)

Northbrook

IL

60062

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00040253

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

05

01

2006

through

05

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Steven C. Verney

Signature of Treasurer

Electronically Filed by Steven C. Verney

Date

06

15

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Allstate Insurance Company PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		113864.78
(b) Cash on Hand at Beginning of Reporting Period	127959.05	
(c) Total Receipts (from Line 19)	31171.36	177477.32
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	159130.41	291342.10
7. Total Disbursements (from Line 31)	29445.14	161656.83
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	129685.27	129685.27
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	24838.28	80651.95
(i) Itemized (use Schedule A)	5832.41	96322.11
(ii) Unitemized	30670.69	176974.06
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	30670.69	176974.06
12. Transfers From Affiliated/Other Party Committees .....	.00	.00
13. All Loans Received .....	.00	.00
14. Loan Repayments Received .....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	500.00	500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.67	3.26
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	.00	.00
(b) Levin Funds (from Schedule H5) .....	.00	.00
(c) Total Transfer (add 18(a) and 18(b)).	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	31171.36	177477.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	31171.36	177477.32

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	.00	.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures.....	145.14	906.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	145.14	906.83
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	59500.00
24. Independent Expenditure (use Schedule E) .....	.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	.00	.00
29. Other Disbursements.....	21300.00	101250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share .....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	29445.14	161656.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	29445.14	161656.83

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	30670.69	176974.06
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30670.69	176974.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	145.14	906.83
37. Offsets to Operating Expenditures (from Line 15, page 3)	500.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-354.86	406.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 REBECCA A ABEL
 Mailing Address 657 CORAL COURT

City State Zip Code
 LINDENHURST IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790726

Amount of Each Receipt this Period

21.80

B. Full Name (Last, First, Middle Initial)
 REBECCA A ABEL
 Mailing Address 657 CORAL COURT

City State Zip Code
 LINDENHURST IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.80

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829581

Amount of Each Receipt this Period

21.80

C. Full Name (Last, First, Middle Initial)
 JONES G ADUKEH
 Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
 LAKE VILLA IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.60

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790639

Amount of Each Receipt this Period

27.69

SUBTOTAL of Receipts This Page (optional)

71.29

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LORAL ADUKEH
Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790710

Amount of Each Receipt this Period

30.10

B. Full Name (Last, First, Middle Initial)
JONES G ADUKEH
Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.29

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829495

Amount of Each Receipt this Period

27.69

C. Full Name (Last, First, Middle Initial)
LORAL ADUKEH
Mailing Address 1226 RIDGEWOOD LANE

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829565

Amount of Each Receipt this Period

30.10

SUBTOTAL of Receipts This Page (optional)

87.89

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

ERIKA S AHERN

Mailing Address 143 EAST WOOD STREET

City State Zip Code
 PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Counsel III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790262

Amount of Each Receipt this Period

21.82

B. Full Name (Last, First, Middle Initial)

ERIKA S AHERN

Mailing Address 143 EAST WOOD STREET

City State Zip Code
 PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Counsel III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.32

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829119

Amount of Each Receipt this Period

21.82

C. Full Name (Last, First, Middle Initial)

PATRICIA A AITKEN

Mailing Address 1245 CARIBOU LANE

City State Zip Code
 HOFFMAN ESTATES IL 60192

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.41

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829294

Amount of Each Receipt this Period

19.35

SUBTOTAL of Receipts This Page (optional)

62.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) H.J. ALANIZ		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 3626 JUSTIN DR		Transaction ID: A2006-790658
City PALM HARBOR	State FL	Zip Code 34685
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.72
Name of Employer Allstate Insurance Company	Occupation Distribution Clerk	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.43	

B. Full Name (Last, First, Middle Initial) NANCY H ANDERSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 25 BRUCE CIRCLE NORTH		Transaction ID: A2006-790448
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.14
Name of Employer Allstate Insurance Company	Occupation Accounting Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.80	

C. Full Name (Last, First, Middle Initial) NANCY H ANDERSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 25 BRUCE CIRCLE NORTH		Transaction ID: A2006-829305
City HAWTHORN WOODS	State IL	Zip Code 60047
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 27.14
Name of Employer Allstate Insurance Company	Occupation Accounting Senior Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 293.94	

SUBTOTAL of Receipts This Page (optional)

86.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

DAVID ASCHENBRENNER

Mailing Address 330 FAIRWAY VIEW DRIVE

City State Zip Code
 ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790619

Amount of Each Receipt this Period

32.70

B.

Full Name (Last, First, Middle Initial)

DAVID ASCHENBRENNER

Mailing Address 330 FAIRWAY VIEW DRIVE

City State Zip Code
 ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.70

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829475

Amount of Each Receipt this Period

32.70

C.

Full Name (Last, First, Middle Initial)

ROBERTA S ASHER

Mailing Address 1439 N KEYSTONE

City State Zip Code
 RIVER FOREST IL 60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.57

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829392

Amount of Each Receipt this Period

18.87

SUBTOTAL of Receipts This Page (optional)

84.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City State Zip Code
 GRAYS LAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Enterprise Infrastruct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.58

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790256

Amount of Each Receipt this Period

64.50

Full Name (Last, First, Middle Initial)

B. JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City State Zip Code
 GRAYS LAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Enterprise Infrastruct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

674.08

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829113

Amount of Each Receipt this Period

64.50

Full Name (Last, First, Middle Initial)

C. CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE N

City State Zip Code
 JACKSONVILLE FL 32224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.58

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790365

Amount of Each Receipt this Period

29.66

SUBTOTAL of Receipts This Page (optional)

158.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHARLES C BAGGS

Mailing Address 4435 SWILCAN BRIDGE LANE N

City State Zip Code
JACKSONVILLE FL 32224

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829222

Amount of Each Receipt this Period

29.66

B. Full Name (Last, First, Middle Initial)
DIANE G BAKER

Mailing Address 120 EAST SHERIDAN RD

City State Zip Code
LAKE BLUFF IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-PRODUCT OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790360

Amount of Each Receipt this Period

46.36

C. Full Name (Last, First, Middle Initial)
RICHARD L BAKER

Mailing Address 1125 W ACORN TRAIL

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Internal S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.29

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790413

Amount of Each Receipt this Period

59.95

SUBTOTAL of Receipts This Page (optional)

135.97

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 DIANE G BAKER
 Mailing Address 120 EAST SHERIDAN RD

City State Zip Code
 LAKE BLUFF IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP-PRODUCT OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.56

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829217

Amount of Each Receipt this Period

46.36

B. Full Name (Last, First, Middle Initial)
 RICHARD L BAKER
 Mailing Address 1125 W ACORN TRAIL

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Vice President Internal S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.24

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829270

Amount of Each Receipt this Period

59.95

C. Full Name (Last, First, Middle Initial)
 GARRY J BALLEK
 Mailing Address 1013 MASON LANE

City State Zip Code
 LAKE IN THE HIL IL 60156

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Unclassified Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.85

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829376

Amount of Each Receipt this Period

18.80

SUBTOTAL of Receipts This Page (optional)

125.11

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM P BALLINGER

Mailing Address 47530 ABERDEEN DR

City State Zip Code
 NOVI MI 48374

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
FVP President New Jersey

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.86

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790335

Amount of Each Receipt this Period

32.31

Full Name (Last, First, Middle Initial)

B. WILLIAM P BALLINGER

Mailing Address 47530 ABERDEEN DR

City State Zip Code
 NOVI MI 48374

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
FVP President New Jersey

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.17

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829192

Amount of Each Receipt this Period

32.31

Full Name (Last, First, Middle Initial)

C. ROBERT H BARGE III

Mailing Address 2222 LOCH WAY

City State Zip Code
 EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.38

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790724

Amount of Each Receipt this Period

61.49

SUBTOTAL of Receipts This Page (optional)

126.11

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) ROBERT H BARGE III Mailing Address 2222 LOCH WAY City EL DORADO HILLS State CA Zip Code 95762 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Vice President Field Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 659.87		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-829579 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">61.49</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	6		2	0	0	6	61.49									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		2	6		2	0	0	6																							
61.49																																
B. Full Name (Last, First, Middle Initial) DAVID J BAUMGARDNER Mailing Address 12620 Lake Normandy Lane City Fairfax State VA Zip Code 22030 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 232.65		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-790410 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">23.72</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	0	6	23.72									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		1	2		2	0	0	6																							
23.72																																
C. Full Name (Last, First, Middle Initial) DAVID J BAUMGARDNER Mailing Address 12620 Lake Normandy Lane City Fairfax State VA Zip Code 22030 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Regional Distribution Lea Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 256.37		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: A2006-829267 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">23.72</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	6		2	0	0	6	23.72									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	5		2	6		2	0	0	6																							
23.72																																

SUBTOTAL of Receipts This Page (optional)

108.93

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT K BECKER

Mailing Address 80 RAVINE DRIVE

City State Zip Code
 COLONIA NJ 07067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.68

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829133

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

B. DIANE BELLAS

Mailing Address 632 Concord Way

City State Zip Code
 Prospect Heights IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.75

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790475

Amount of Each Receipt this Period

23.31

Full Name (Last, First, Middle Initial)

C. DIANE BELLAS

Mailing Address 632 Concord Way

City State Zip Code
 Prospect Heights IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.06

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829332

Amount of Each Receipt this Period

23.31

SUBTOTAL of Receipts This Page (optional)

66.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.50

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790555

Amount of Each Receipt this Period

30.54

Full Name (Last, First, Middle Initial)

B. WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.04

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829411

Amount of Each Receipt this Period

30.54

Full Name (Last, First, Middle Initial)

C. EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
 GLENCOE IL 60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP and President Broker D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.69

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790298

Amount of Each Receipt this Period

37.71

SUBTOTAL of Receipts This Page (optional)

98.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

EDWARD A BIEMER

Mailing Address 807 Greenwood Ave.

City State Zip Code
 GLENCOE IL 60022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP and President Broker D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.40

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829155

Amount of Each Receipt this Period

37.71

B. Full Name (Last, First, Middle Initial)

DAVID G BIEMILLER

Mailing Address 480 LEES LAKE RD

City State Zip Code
 FAYETTEVILLE GA 30214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Frontline Performance Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.33

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829238

Amount of Each Receipt this Period

18.63

C. Full Name (Last, First, Middle Initial)

ANN L BIERNACKI

Mailing Address 11 Heron Drive

City State Zip Code
 Palatine IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Staff Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.30

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790494

Amount of Each Receipt this Period

24.28

SUBTOTAL of Receipts This Page (optional)

80.62

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANN L BIERNACKI

Mailing Address 11 Heron Drive

City	State	Zip Code
Palatine	IL	60067

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Staff Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829351

Amount of Each Receipt this Period

24.28

Full Name (Last, First, Middle Initial)

B. DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City	State	Zip Code
PONTE VEDRA BEA	FL	32082

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
President-Allstate Workpl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790642

Amount of Each Receipt this Period

37.28

Full Name (Last, First, Middle Initial)

C. DAVID A BIRD

Mailing Address 24567 HARBOUR VIEW DRIVE

City	State	Zip Code
PONTE VEDRA BEA	FL	32082

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
President-Allstate Workpl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829498

Amount of Each Receipt this Period

37.28

SUBTOTAL of Receipts This Page (optional)

98.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROBERT L BLOCK
 Mailing Address 398 Brookmont Lane

City State Zip Code
 North Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.76

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790627

Amount of Each Receipt this Period

57.33

B. Full Name (Last, First, Middle Initial)
 ROBERT L BLOCK
 Mailing Address 398 Brookmont Lane

City State Zip Code
 North Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.09

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829483

Amount of Each Receipt this Period

57.33

C. Full Name (Last, First, Middle Initial)
 RAYMOND R BOGAERT
 Mailing Address 187 IMPERIAL COURT

City State Zip Code
 PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.28

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829356

Amount of Each Receipt this Period

19.63

SUBTOTAL of Receipts This Page (optional)

134.29

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHARLES A BOLLINGER

Mailing Address 509 GATES HEAD SOUTH

City State Zip Code
ELK GROVE VLLGE IL 60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.81

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790419

Amount of Each Receipt this Period

46.15

B. Full Name (Last, First, Middle Initial)
CHARLES A BOLLINGER

Mailing Address 509 GATES HEAD SOUTH

City State Zip Code
ELK GROVE VLLGE IL 60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829276

Amount of Each Receipt this Period

46.15

C. Full Name (Last, First, Middle Initial)
MICHAEL E BOND

Mailing Address 1246 PRAIRIE ORCHID LANE

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
F&P/Enterprise Risk Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790587

Amount of Each Receipt this Period

26.17

SUBTOTAL of Receipts This Page (optional)

118.47

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) MICHAEL E BOND Mailing Address 1246 PRAIRIE ORCHID LANE City State Zip Code GRAYSLAKE IL 60030 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation F&P/Enterprise Risk Manag Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 282.97		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Transaction ID: A2006-829443 Amount of Each Receipt this Period 26.17
B. Full Name (Last, First, Middle Initial) DOUGLAS L BORG Mailing Address 5550 Maybeck Ln City State Zip Code Livermore CA 94550 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Territorial Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.20		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: A2006-790721 Amount of Each Receipt this Period 24.40
C. Full Name (Last, First, Middle Initial) DOUGLAS L BORG Mailing Address 5550 Maybeck Ln City State Zip Code Livermore CA 94550 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Territorial Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 262.60		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Transaction ID: A2006-829576 Amount of Each Receipt this Period 24.40

SUBTOTAL of Receipts This Page (optional)

74.97

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL B BOYLE
Mailing Address 1063 CHERRY STREET

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Info Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

694.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790339

Amount of Each Receipt this Period

71.08

B. Full Name (Last, First, Middle Initial)
MICHAEL B BOYLE
Mailing Address 1063 CHERRY STREET

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Info Techn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.08

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829196

Amount of Each Receipt this Period

71.08

C. Full Name (Last, First, Middle Initial)
LONDON B BRADLEY
Mailing Address 1951 BROADSMORE

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Market Distribution Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.83

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829540

Amount of Each Receipt this Period

19.63

SUBTOTAL of Receipts This Page (optional)

161.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KENNETH A BRANCH

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code
 IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.75

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829505

Amount of Each Receipt this Period

19.45

Full Name (Last, First, Middle Initial)

B. JEFFREY P BRASK

Mailing Address 21285 S. BOSCHOME CIRCLE

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.83

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829362

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. KATHLEEN M BRESNAHAN

Mailing Address 1379 ORLEANS DRIVE UNIT D

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.98

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829279

Amount of Each Receipt this Period

19.63

SUBTOTAL of Receipts This Page (optional)

58.31

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City	State	Zip Code
LAKE ZURICH	IL	60047

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790486

Amount of Each Receipt this Period

37.19

Full Name (Last, First, Middle Initial)

B. SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City	State	Zip Code
LAKE ZURICH	IL	60047

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829343

Amount of Each Receipt this Period

37.19

Full Name (Last, First, Middle Initial)

C. DAVID C BROCK

Mailing Address 305 CHURCHILL LANE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
CC IT Senior Planning Con

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790348

Amount of Each Receipt this Period

33.47

SUBTOTAL of Receipts This Page (optional)

107.85

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
J D BROCK
Mailing Address 4958 DAY LILY WAY

City State Zip Code
ACWORTH GA 30102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.05

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790648

Amount of Each Receipt this Period

31.87

B. Full Name (Last, First, Middle Initial)
DAVID C BROCK
Mailing Address 305 CHURCHILL LANE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Planning Con

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.07

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829205

Amount of Each Receipt this Period

33.47

C. Full Name (Last, First, Middle Initial)
J D BROCK
Mailing Address 4958 DAY LILY WAY

City State Zip Code
ACWORTH GA 30102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.92

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829504

Amount of Each Receipt this Period

31.87

SUBTOTAL of Receipts This Page (optional)

97.21

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RAYMOND L BROEDER
 Mailing Address 18602 STERLING CT.

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.68

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829467

Amount of Each Receipt this Period

19.88

B. Full Name (Last, First, Middle Initial)
 WILLIAM F BROKAW
 Mailing Address 3 MILTON CT

City State Zip Code
 CARY IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.68

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829336

Amount of Each Receipt this Period

19.88

C. Full Name (Last, First, Middle Initial)
 WILLIAM J BROOKS
 Mailing Address 121 HOLLENDEN LANE

City State Zip Code
 MADISON MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790378

Amount of Each Receipt this Period

25.47

SUBTOTAL of Receipts This Page (optional)

65.23

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM J BROOKS

Mailing Address 121 HOLLENDEN LANE

City State Zip Code
MADISON MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.47

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829235

Amount of Each Receipt this Period

25.47

Full Name (Last, First, Middle Initial)

B. BETH A BROWN

Mailing Address 2637 W. WILSON AVE.

City State Zip Code
CHICAGO IL 60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790423

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

C. BETH A BROWN

Mailing Address 2637 W. WILSON AVE.

City State Zip Code
CHICAGO IL 60625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.47

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829280

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

105.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.41

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829450

Amount of Each Receipt this Period

19.86

B. Full Name (Last, First, Middle Initial)

CATHERINE S BRUNE

Mailing Address 190 SAVANNA CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP & Chief Information O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1561.57

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790364

Amount of Each Receipt this Period

161.54

C. Full Name (Last, First, Middle Initial)

CATHERINE S BRUNE

Mailing Address 190 SAVANNA CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP & Chief Information O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1723.11

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829221

Amount of Each Receipt this Period

161.54

SUBTOTAL of Receipts This Page (optional)

342.94

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

City	State	Zip Code
BERWYN	IL	60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790480

Amount of Each Receipt this Period

33.54

Full Name (Last, First, Middle Initial)

B. ANNE MARIE L BRUNNER

Mailing Address 2514 SOUTH WESLEY AVE

City	State	Zip Code
BERWYN	IL	60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829337

Amount of Each Receipt this Period

33.54

Full Name (Last, First, Middle Initial)

C. JOHN C BRUSE

Mailing Address 1434 WOODACRE DRIVE

City	State	Zip Code
MC LEAN	VA	22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President & Ast Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790698

Amount of Each Receipt this Period

34.00

SUBTOTAL of Receipts This Page (optional)

101.08

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN C BRUSE

Mailing Address 1434 WOODACRE DRIVE

City	State	Zip Code
MC LEAN	VA	22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President & Ast Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829553

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

B. STEVEN C BUCHHOLZ

Mailing Address 412 S. VAIL

City	State	Zip Code
ARL HEIGHTS	IL	60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790441

Amount of Each Receipt this Period

29.92

Full Name (Last, First, Middle Initial)

C. STEVEN C BUCHHOLZ

Mailing Address 412 S. VAIL

City	State	Zip Code
ARL HEIGHTS	IL	60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829298

Amount of Each Receipt this Period

29.92

SUBTOTAL of Receipts This Page (optional)

93.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
NANCY M BUFALINO
Mailing Address 250 E. PEARSON #1701

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.61

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790510

Amount of Each Receipt this Period

22.50

B. Full Name (Last, First, Middle Initial)
NANCY M BUFALINO
Mailing Address 250 E. PEARSON #1701

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829367

Amount of Each Receipt this Period

22.50

C. Full Name (Last, First, Middle Initial)
DAVID N BUGGS
Mailing Address 12234 85TH AVE

City State Zip Code
PLEASANT PR WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790628

Amount of Each Receipt this Period

31.82

SUBTOTAL of Receipts This Page (optional)

76.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID N BUGGS
Mailing Address 12234 85TH AVE

City State Zip Code
PLEASANT PR WI 53158

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829484

Amount of Each Receipt this Period

31.82

B. Full Name (Last, First, Middle Initial)
KAREN E BURCKHARDT
Mailing Address 730 E. HAWTHORNE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.09

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790626

Amount of Each Receipt this Period

39.68

C. Full Name (Last, First, Middle Initial)
KAREN E BURCKHARDT
Mailing Address 730 E. HAWTHORNE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.77

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829482

Amount of Each Receipt this Period

39.68

SUBTOTAL of Receipts This Page (optional)

111.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

PEGGY BURROWS

Mailing Address 2628 HALSEY DRIVE

City State Zip Code
 FLOWER MOUND TX 75028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.55

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790662

Amount of Each Receipt this Period

28.43

B. Full Name (Last, First, Middle Initial)

PEGGY BURROWS

Mailing Address 2628 HALSEY DRIVE

City State Zip Code
 FLOWER MOUND TX 75028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.98

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829517

Amount of Each Receipt this Period

28.43

C. Full Name (Last, First, Middle Initial)

CECILE A BUTLER

Mailing Address 9309 ELIZABETH LANE

City State Zip Code
 SPRING GROVE IL 60081

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Tax Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.65

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790238

Amount of Each Receipt this Period

83.91

SUBTOTAL of Receipts This Page (optional)

140.77

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 CECILE A BUTLER
 Mailing Address 9309 ELIZABETH LANE

City State Zip Code
 SPRING GROVE IL 60081

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP & Tax Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

899.56

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829095

Amount of Each Receipt this Period

83.91

B. Full Name (Last, First, Middle Initial)
 D C BUTLER III
 Mailing Address 15430 WHITE COLUMNS DRIVE

City State Zip Code
 ALPHARETTA GA 30004

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.57

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790361

Amount of Each Receipt this Period

50.23

C. Full Name (Last, First, Middle Initial)
 D C BUTLER III
 Mailing Address 15430 WHITE COLUMNS DRIVE

City State Zip Code
 ALPHARETTA GA 30004

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.80

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829218

Amount of Each Receipt this Period

50.23

SUBTOTAL of Receipts This Page (optional)

184.37

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH K CAMPBELL

Mailing Address 21863 NORTH TALL OAKS COURT

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.99

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790602

Amount of Each Receipt this Period

57.81

Full Name (Last, First, Middle Initial)

B. DEBORAH K CAMPBELL

Mailing Address 21863 NORTH TALL OAKS COURT

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

623.80

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829458

Amount of Each Receipt this Period

57.81

Full Name (Last, First, Middle Initial)

C. RAYMOND CELAYA

Mailing Address 21910 WEST PINE LAKE CIRCLE

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.08

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790741

Amount of Each Receipt this Period

22.77

SUBTOTAL of Receipts This Page (optional)

138.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) RAYMOND CELAYA Mailing Address 21910 WEST PINE LAKE CIRCLE City State Zip Code KILDEER IL 60047 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation AVP Procurement Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.85		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Transaction ID: A2006-829595 Amount of Each Receipt this Period 22.77
B. Full Name (Last, First, Middle Initial) IRIS M CHESTER Mailing Address 643 ST GEORGE CT City State Zip Code LAKE FOREST IL 60045 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation AVP Human Resource Ivanta Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 218.06		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Transaction ID: A2006-829494 Amount of Each Receipt this Period 20.32
C. Full Name (Last, First, Middle Initial) DELIA M CHILGREN Mailing Address 2441-5TH AVENUE City State Zip Code SACRAMENTO CA 95818 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 394.90		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: A2006-790743 Amount of Each Receipt this Period 39.76

SUBTOTAL of Receipts This Page (optional)

82.85

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 DELIA M CHILGREN
 Mailing Address 2441-5TH AVENUE

City State Zip Code
 SACRAMENTO CA 95818

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.66

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829597

Amount of Each Receipt this Period

39.76

B. Full Name (Last, First, Middle Initial)
 SCOTT M CHRISTENSEN
 Mailing Address 20713 LEXINGTON LANE

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.55

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790544

Amount of Each Receipt this Period

35.47

C. Full Name (Last, First, Middle Initial)
 SCOTT M CHRISTENSEN
 Mailing Address 20713 LEXINGTON LANE

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.02

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829400

Amount of Each Receipt this Period

35.47

SUBTOTAL of Receipts This Page (optional)

110.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL A CLARK

Mailing Address 26115 N 104TH WAY

City State Zip Code
SCOTTSDALE **AZ** **85255**

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790277

Amount of Each Receipt this Period

41.96

Full Name (Last, First, Middle Initial)

B. MICHAEL A CLARK

Mailing Address 26115 N 104TH WAY

City State Zip Code
SCOTTSDALE **AZ** **85255**

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.56

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829134

Amount of Each Receipt this Period

41.96

Full Name (Last, First, Middle Initial)

C. MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
WESTERN SPRINGS **IL** **60558**

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.25

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790409

Amount of Each Receipt this Period

32.13

SUBTOTAL of Receipts This Page (optional)

116.05

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARK P CLOGHESSY

Mailing Address 4343 LAWN AVE

City State Zip Code
 WESTERN SPRINGS IL 60558

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.38

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829266

Amount of Each Receipt this Period

32.13

B. Full Name (Last, First, Middle Initial)
DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
 PALM HARBOR FL 34685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790574

Amount of Each Receipt this Period

26.71

C. Full Name (Last, First, Middle Initial)
DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City State Zip Code
 PALM HARBOR FL 34685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.71

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829430

Amount of Each Receipt this Period

26.71

SUBTOTAL of Receipts This Page (optional)

85.55

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LISA D COCHRANE
Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.15

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790530

Amount of Each Receipt this Period

30.12

B. Full Name (Last, First, Middle Initial)
LISA D COCHRANE
Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code
WINNETKA IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.27

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829386

Amount of Each Receipt this Period

30.12

C. Full Name (Last, First, Middle Initial)
EDWARD T COLLINS
Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.39

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790465

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

100.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWARD T COLLINS
Mailing Address 809 DUNHILL COURT

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.16

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829322

Amount of Each Receipt this Period

39.77

B. Full Name (Last, First, Middle Initial)
MICHAEL P COOGAN
Mailing Address 1609 SYRACUSE LN.

City State Zip Code
SCHAUMBURG IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.65

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790533

Amount of Each Receipt this Period

28.11

C. Full Name (Last, First, Middle Initial)
MICHAEL P COOGAN
Mailing Address 1609 SYRACUSE LN.

City State Zip Code
SCHAUMBURG IL 60193

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.76

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829389

Amount of Each Receipt this Period

28.11

SUBTOTAL of Receipts This Page (optional)

95.99

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOAN M COONEY

Mailing Address 615 W. PARK ST.

City State Zip Code
 ARLINGTON HTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.30

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790472

Amount of Each Receipt this Period

37.35

Full Name (Last, First, Middle Initial)

B. JOAN M COONEY

Mailing Address 615 W. PARK ST.

City State Zip Code
 ARLINGTON HTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.65

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829329

Amount of Each Receipt this Period

37.35

Full Name (Last, First, Middle Initial)

C. RONALD L CORBIN

Mailing Address 14 Portrush Place

City State Zip Code
 BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.51

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790655

Amount of Each Receipt this Period

64.28

SUBTOTAL of Receipts This Page (optional)

138.98

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RONALD L CORBIN

Mailing Address 14 Portrush Place

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.79

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829511

Amount of Each Receipt this Period

64.28

B. Full Name (Last, First, Middle Initial)
THOMAS J CREAGH

Mailing Address 4008 NORTH HIGHLAND AVENUE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829136

Amount of Each Receipt this Period

19.69

C. Full Name (Last, First, Middle Initial)
WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City State Zip Code
ARLINGTON HGTS. IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790420

Amount of Each Receipt this Period

67.74

SUBTOTAL of Receipts This Page (optional)

151.71

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
WILLIAM G CRIMMINS

Mailing Address 218 S KASPAR

City State Zip Code
 ARLINGTON HGTS. IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.92

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829277

Amount of Each Receipt this Period

67.74

B. Full Name (Last, First, Middle Initial)
FREDERICK F CRIPE

Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
 N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
GVP-Product Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

737.28

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790414

Amount of Each Receipt this Period

76.15

C. Full Name (Last, First, Middle Initial)
FREDERICK F CRIPE

Mailing Address 277 N. BILTMORE DRIVE

City State Zip Code
 N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
GVP-Product Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

813.43

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829271

Amount of Each Receipt this Period

76.15

SUBTOTAL of Receipts This Page (optional)

220.04

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RICHARD C CRIST JR
 Mailing Address 14 CARDINAL DRIVE

City State Zip Code
 PRINCETON JUNCT NJ 08550

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.61

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790315

Amount of Each Receipt this Period

65.96

B. Full Name (Last, First, Middle Initial)
 RICHARD C CRIST JR
 Mailing Address 14 CARDINAL DRIVE

City State Zip Code
 PRINCETON JUNCT NJ 08550

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.57

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829172

Amount of Each Receipt this Period

65.96

C. Full Name (Last, First, Middle Initial)
 JOAN M CROCKETT
 Mailing Address 27 RIVER BEND CT

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1058.07

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790388

Amount of Each Receipt this Period

113.08

SUBTOTAL of Receipts This Page (optional)

245.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOAN M CROCKETT

Mailing Address 27 RIVER BEND CT

City State Zip Code
LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1171.15

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829245

Amount of Each Receipt this Period

113.08

Full Name (Last, First, Middle Initial)

B. WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790297

Amount of Each Receipt this Period

35.74

Full Name (Last, First, Middle Initial)

C. WILLIAM DALY

Mailing Address 22425 N LINDEN DR.

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.94

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829154

Amount of Each Receipt this Period

35.74

SUBTOTAL of Receipts This Page (optional)

184.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

ROBERT W DANIELS

Mailing Address 1020 Pleasant Street #1

City State Zip Code
 Oak Park IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.15

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790347

Amount of Each Receipt this Period

27.88

B. Full Name (Last, First, Middle Initial)

ROBERT W DANIELS

Mailing Address 1020 Pleasant Street #1

City State Zip Code
 Oak Park IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.03

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829204

Amount of Each Receipt this Period

27.88

C. Full Name (Last, First, Middle Initial)

SAM DE FRANK

Mailing Address 5 COURT OF HIDDEN WELLS

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Tax Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.74

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790477

Amount of Each Receipt this Period

32.02

SUBTOTAL of Receipts This Page (optional)

87.78

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) SAM DE FRANK			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 5 COURT OF HIDDEN WELLS			Transaction ID: A2006-829334	
City State Zip Code NORTHBROOK IL 60062			Amount of Each Receipt this Period 32.02	
FEC ID number of contributing federal political committee. C				
Name of Employer Allstate Insurance Company		Occupation AVP & Tax Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 346.76		
B. Full Name (Last, First, Middle Initial) PETER D DEBRECENY			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 1512 NORTH HOYNE AVE			Transaction ID: A2006-790402	
City State Zip Code CHICAGO IL 60622			Amount of Each Receipt this Period 58.62	
FEC ID number of contributing federal political committee. C				
Name of Employer Allstate Insurance Company		Occupation Vice President Corporate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 574.30		
C. Full Name (Last, First, Middle Initial) PETER D DEBRECENY			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 1512 NORTH HOYNE AVE			Transaction ID: A2006-829259	
City State Zip Code CHICAGO IL 60622			Amount of Each Receipt this Period 58.62	
FEC ID number of contributing federal political committee. C				
Name of Employer Allstate Insurance Company		Occupation Vice President Corporate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 632.92		

SUBTOTAL of Receipts This Page (optional)

149.26

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RANDAL S DECOURSEY

Mailing Address 6710 BLUE RIDGE LANE

City State Zip Code
LINCOLN NE 68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790469

Amount of Each Receipt this Period

27.78

B. Full Name (Last, First, Middle Initial)
RANDAL S DECOURSEY

Mailing Address 6710 BLUE RIDGE LANE

City State Zip Code
LINCOLN NE 68516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.33

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829326

Amount of Each Receipt this Period

27.78

C. Full Name (Last, First, Middle Initial)
STEVEN J DEGNAN-SCHMIDT

Mailing Address 1320 MULBERRY LN.

City State Zip Code
CARY IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.25

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790393

Amount of Each Receipt this Period

34.08

SUBTOTAL of Receipts This Page (optional)

89.64

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN J DEGNAN-SCHMIDT

Mailing Address 1320 MULBERRY LN.

City State Zip Code
CARY IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.33

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829250

Amount of Each Receipt this Period

34.08

Full Name (Last, First, Middle Initial)

B. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Specialty Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.81

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790591

Amount of Each Receipt this Period

49.74

Full Name (Last, First, Middle Initial)

C. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Specialty Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829447

Amount of Each Receipt this Period

49.74

SUBTOTAL of Receipts This Page (optional)

133.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LORI A DESCH
Mailing Address 5 TREGONWELL COURT

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.22

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790379

Amount of Each Receipt this Period

29.31

B. Full Name (Last, First, Middle Initial)
LORI A DESCH
Mailing Address 5 TREGONWELL COURT

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.53

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829236

Amount of Each Receipt this Period

29.31

C. Full Name (Last, First, Middle Initial)
LEO DISHEL
Mailing Address 340 E 74TH ST APT 6C

City State Zip Code
NEW YORK NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Market Distribution Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.96

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829132

Amount of Each Receipt this Period

19.71

SUBTOTAL of Receipts This Page (optional)

78.33

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

MARIE E DIVIRGILIO

Mailing Address 2063 CHARTER POINT DR

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.80

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790604

Amount of Each Receipt this Period

39.76

B. Full Name (Last, First, Middle Initial)

MARIE E DIVIRGILIO

Mailing Address 2063 CHARTER POINT DR

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.56

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829460

Amount of Each Receipt this Period

39.76

C. Full Name (Last, First, Middle Initial)

SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Northbrook/Glenbrook

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.31

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790565

Amount of Each Receipt this Period

35.69

SUBTOTAL of Receipts This Page (optional)

115.21

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SARAH R DONAHUE

Mailing Address 4147 RFD

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Northbrook/Glenbrook

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829421

Amount of Each Receipt this Period

35.69

Full Name (Last, First, Middle Initial)

B. PHILIP J DORN

Mailing Address 12 SAINT JOHN DRIVE

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Investor Relations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.67

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829560

Amount of Each Receipt this Period

19.87

Full Name (Last, First, Middle Initial)

C. DANIEL C DRESSSEL

Mailing Address 1706 ADLER LANE

City State Zip Code
MALVERN PA 19355

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.76

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829176

Amount of Each Receipt this Period

19.41

SUBTOTAL of Receipts This Page (optional)

74.97

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY R DUGAN

Mailing Address 3220 SANDY LANE

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790692

Amount of Each Receipt this Period

28.40

Full Name (Last, First, Middle Initial)

B. TIMOTHY R DUGAN

Mailing Address 3220 SANDY LANE

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.40

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829547

Amount of Each Receipt this Period

28.40

Full Name (Last, First, Middle Initial)

C. LAURA DUNNE

Mailing Address 1810 BALMORAL AVE

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Strategy Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.35

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790547

Amount of Each Receipt this Period

20.93

SUBTOTAL of Receipts This Page (optional)

77.73

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LAURA DUNNE
Mailing Address 1810 BALMORAL AVE

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Strategy Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.28

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829403

Amount of Each Receipt this Period

20.93

B. Full Name (Last, First, Middle Initial)
DANIEL P DURBIN
Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790572

Amount of Each Receipt this Period

26.63

C. Full Name (Last, First, Middle Initial)
DANIEL P DURBIN
Mailing Address 1311 SOUTH WALNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.43

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829428

Amount of Each Receipt this Period

26.63

SUBTOTAL of Receipts This Page (optional)

74.19

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GEOFFREY A DURHAM
Mailing Address 504 ROOSEVELT DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.25

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790703

Amount of Each Receipt this Period

32.60

B. Full Name (Last, First, Middle Initial)
GEOFFREY A DURHAM
Mailing Address 504 ROOSEVELT DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.85

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829558

Amount of Each Receipt this Period

32.60

C. Full Name (Last, First, Middle Initial)
ELIZABETH A EDE
Mailing Address 16 LINDON LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790671

Amount of Each Receipt this Period

32.20

SUBTOTAL of Receipts This Page (optional)

97.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ELIZABETH A EDE

Mailing Address 16 LINDON LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829526

Amount of Each Receipt this Period

32.20

B. Full Name (Last, First, Middle Initial)

JOHN EDELEN

Mailing Address 1250 So Indiana - Unit 1309

City State Zip Code
Chicago IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP P-CCSO Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790299

Amount of Each Receipt this Period

41.35

C. Full Name (Last, First, Middle Initial)

JOHN EDELEN

Mailing Address 1250 So Indiana - Unit 1309

City State Zip Code
Chicago IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP P-CCSO Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.75

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829156

Amount of Each Receipt this Period

41.35

SUBTOTAL of Receipts This Page (optional)

114.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
NINA B EIDELL
Mailing Address 25 E. Superior # 11B

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Human Reso

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.15

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790244

Amount of Each Receipt this Period

61.06

B. Full Name (Last, First, Middle Initial)
NINA B EIDELL
Mailing Address 25 E. Superior # 11B

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Human Reso

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.21

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829101

Amount of Each Receipt this Period

61.06

C. Full Name (Last, First, Middle Initial)
PHILIP L EMMANUELE
Mailing Address 1085 FOREST HILL RD.

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Marketing Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790278

Amount of Each Receipt this Period

58.25

SUBTOTAL of Receipts This Page (optional)

180.37

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 PHILIP L EMMANUELE
 Mailing Address 1085 FOREST HILL RD.

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Marketing Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.77

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829135

Amount of Each Receipt this Period

58.25

B. Full Name (Last, First, Middle Initial)
 KATHLEEN N ENRIGHT
 Mailing Address 10323 TRUMBULL AVE

City State Zip Code
 CHICAGO IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.05

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790581

Amount of Each Receipt this Period

33.61

C. Full Name (Last, First, Middle Initial)
 KATHLEEN N ENRIGHT
 Mailing Address 10323 TRUMBULL AVE

City State Zip Code
 CHICAGO IL 60655

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.66

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829437

Amount of Each Receipt this Period

33.61

SUBTOTAL of Receipts This Page (optional)

125.47

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.27

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790257

Amount of Each Receipt this Period

48.44

Full Name (Last, First, Middle Initial)

B. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance Innovation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.71

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829114

Amount of Each Receipt this Period

48.44

Full Name (Last, First, Middle Initial)

C. RICHARD B ESPINOZA

Mailing Address 673 HASTINGS ROAD

City State Zip Code
 WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.85

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790497

Amount of Each Receipt this Period

29.83

SUBTOTAL of Receipts This Page (optional)

126.71

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RICHARD B ESPINOZA
 Mailing Address 673 HASTINGS ROAD

City State Zip Code
 WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.68

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829354

Amount of Each Receipt this Period

29.83

B. Full Name (Last, First, Middle Initial)
 THOMAS W EVANS
 Mailing Address 1224 BARCLAY CIRCLE

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.85

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790295

Amount of Each Receipt this Period

40.47

C. Full Name (Last, First, Middle Initial)
 THOMAS W EVANS
 Mailing Address 1224 BARCLAY CIRCLE

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.32

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829152

Amount of Each Receipt this Period

40.47

SUBTOTAL of Receipts This Page (optional)

110.77

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DOROTHY EVEN
Mailing Address 1130 KEYSTONE AVENUE

City State Zip Code
RIVER FOREST IL 60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.87

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790463

Amount of Each Receipt this Period

78.81

B. Full Name (Last, First, Middle Initial)
DOROTHY EVEN
Mailing Address 1130 KEYSTONE AVENUE

City State Zip Code
RIVER FOREST IL 60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829320

Amount of Each Receipt this Period

78.81

C. Full Name (Last, First, Middle Initial)
LAURA A FABREGUE
Mailing Address 1000 HAMAN WAY

City State Zip Code
ROSEVILLE CA 95678

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.19

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790318

Amount of Each Receipt this Period

28.43

SUBTOTAL of Receipts This Page (optional)

186.05

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LAURA A FABREGUE
Mailing Address 1000 HAMAN WAY

City State Zip Code
ROSEVILLE CA 95678

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.62

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829175

Amount of Each Receipt this Period

28.43

B. Full Name (Last, First, Middle Initial)
KATHRYN L FABYAN
Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790637

Amount of Each Receipt this Period

36.39

C. Full Name (Last, First, Middle Initial)
KATHRYN L FABYAN
Mailing Address 21209 WEST YORKSHIRE DRIVE

City State Zip Code
KILDEER IL 60049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.29

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829493

Amount of Each Receipt this Period

36.39

SUBTOTAL of Receipts This Page (optional)

101.21

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GORDON S FALKNOR
Mailing Address 703 E CHERRY LN

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790492

Amount of Each Receipt this Period

44.35

B. Full Name (Last, First, Middle Initial)
GORDON S FALKNOR
Mailing Address 703 E CHERRY LN

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829349

Amount of Each Receipt this Period

44.35

C. Full Name (Last, First, Middle Initial)
JOHN A FARRUGIA
Mailing Address 926 WILSHIRE DRIVE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Reserve Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790326

Amount of Each Receipt this Period

20.74

SUBTOTAL of Receipts This Page (optional)

109.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A FARRUGIA

Mailing Address 926 WILSHIRE DRIVE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Reserve Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.14

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829183

Amount of Each Receipt this Period

20.74

Full Name (Last, First, Middle Initial)

B. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.60

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790607

Amount of Each Receipt this Period

24.74

Full Name (Last, First, Middle Initial)

C. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City State Zip Code
 GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.34

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829463

Amount of Each Receipt this Period

24.74

SUBTOTAL of Receipts This Page (optional)

70.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STEVEN FINE
Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.22

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790303

Amount of Each Receipt this Period

23.91

B. Full Name (Last, First, Middle Initial)
STEVEN FINE
Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code
ANTIOCH IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.13

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829160

Amount of Each Receipt this Period

23.91

C. Full Name (Last, First, Middle Initial)
DARYLL D FLETCHER
Mailing Address 22256 W MASHI CT

City State Zip Code
IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-KNOWLEDGE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.74

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790455

Amount of Each Receipt this Period

26.87

SUBTOTAL of Receipts This Page (optional)

74.69

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DARYLL D FLETCHER
Mailing Address 22256 W MASHI CT

City State Zip Code
IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-KNOWLEDGE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.61

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829312

Amount of Each Receipt this Period

26.87

B. Full Name (Last, First, Middle Initial)
KELLY F FOGARTY
Mailing Address 613 REX

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Specialty Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.29

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790485

Amount of Each Receipt this Period

35.65

C. Full Name (Last, First, Middle Initial)
KELLY F FOGARTY
Mailing Address 613 REX

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Specialty Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.94

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829342

Amount of Each Receipt this Period

35.65

SUBTOTAL of Receipts This Page (optional)

98.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PATRICIA W FRIDLEY
Mailing Address 945 Shermer Road

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.38

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790397

Amount of Each Receipt this Period

72.00

B. Full Name (Last, First, Middle Initial)
PATRICIA W FRIDLEY
Mailing Address 945 Shermer Road

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.38

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829254

Amount of Each Receipt this Period

72.00

C. Full Name (Last, First, Middle Initial)
MATTHEW D FULLER
Mailing Address 350 EDGE FIELD LANE

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790396

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

183.77

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MATTHEW D FULLER
Mailing Address 350 EDGE FIELD LANE

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.27

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829253

Amount of Each Receipt this Period

39.77

B. Full Name (Last, First, Middle Initial)
VINCENT A FUSCO
Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.86

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790255

Amount of Each Receipt this Period

21.38

C. Full Name (Last, First, Middle Initial)
ANGELA FUSCO
Mailing Address 22255 MASHIE CT

City State Zip Code
IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790317

Amount of Each Receipt this Period

24.86

SUBTOTAL of Receipts This Page (optional)

86.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
VINCENT A FUSCO
Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.24

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829112

Amount of Each Receipt this Period

21.38

B. Full Name (Last, First, Middle Initial)
ANGELA FUSCO
Mailing Address 22255 MASHIE CT

City State Zip Code
IVANHOE IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.26

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829174

Amount of Each Receipt this Period

24.86

C. Full Name (Last, First, Middle Initial)
DOUGLAS F GAER
Mailing Address 5610 SOUTH 88th STREET

City State Zip Code
LINCOLN NE 68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Nebraska Service Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790678

Amount of Each Receipt this Period

22.30

SUBTOTAL of Receipts This Page (optional)

68.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

DOUGLAS F GAER

Mailing Address 5610 SOUTH 88th STREET

City

LINCOLN

State

NE

Zip Code

68526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Nebraska Service Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829533

Amount of Each Receipt this Period

22.30

B.

Full Name (Last, First, Middle Initial)

PATRICK C GALLERY

Mailing Address 2321 WEST STEEPLECHASE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Assistan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.73

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790322

Amount of Each Receipt this Period

56.49

C.

Full Name (Last, First, Middle Initial)

PATRICK C GALLERY

Mailing Address 2321 WEST STEEPLECHASE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

Vice President & Assistan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.22

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829179

Amount of Each Receipt this Period

56.49

SUBTOTAL of Receipts This Page (optional)

135.28

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KAREN C GARDNER
Mailing Address 1434 BAFFIN ROAD

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.62

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790676

Amount of Each Receipt this Period

65.75

B. Full Name (Last, First, Middle Initial)
KAREN C GARDNER
Mailing Address 1434 BAFFIN ROAD

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.37

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829531

Amount of Each Receipt this Period

65.75

C. Full Name (Last, First, Middle Initial)
LYNN A GEHANT
Mailing Address 23W650 WOODWORTH PLACE

City State Zip Code
ROSELLE IL 60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.05

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790498

Amount of Each Receipt this Period

34.85

SUBTOTAL of Receipts This Page (optional)

166.35

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

LYNN A GEHANT

Mailing Address 23W650 WOODWORTH PLACE

City	State	Zip Code
ROSELLE	IL	60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829355

Amount of Each Receipt this Period

34.85

B.

Full Name (Last, First, Middle Initial)

BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City	State	Zip Code
HOFFMAN ESTATES	IL	60195

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP State Team

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790677

Amount of Each Receipt this Period

29.45

C.

Full Name (Last, First, Middle Initial)

BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City	State	Zip Code
HOFFMAN ESTATES	IL	60195

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP State Team

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829532

Amount of Each Receipt this Period

29.45

SUBTOTAL of Receipts This Page (optional)

93.75

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOAN GILMORE

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.27

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790258

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

B. JOAN GILMORE

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.04

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829115

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

C. DEBORAH C GIVENS

Mailing Address 4370 MILNER ROAD WEST

City State Zip Code
 BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.88

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790644

Amount of Each Receipt this Period

41.50

SUBTOTAL of Receipts This Page (optional)

121.04

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH C GIVENS

Mailing Address 4370 MILNER ROAD WEST

City State Zip Code
 BIRMINGHAM AL 35242

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.38

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829500

Amount of Each Receipt this Period

41.50

Full Name (Last, First, Middle Initial)

B. MARLA F GLABE

Mailing Address 83 CARIBOU CROSSING

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

667.37

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790541

Amount of Each Receipt this Period

68.34

Full Name (Last, First, Middle Initial)

C. MARLA F GLABE

Mailing Address 83 CARIBOU CROSSING

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.71

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829397

Amount of Each Receipt this Period

68.34

SUBTOTAL of Receipts This Page (optional)

178.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BARBARA H GOHR
Mailing Address 1601 OLD BARN CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Administrative Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.23

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790377

Amount of Each Receipt this Period

25.98

B. Full Name (Last, First, Middle Initial)
BARBARA H GOHR
Mailing Address 1601 OLD BARN CIRCLE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Administrative Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.21

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829234

Amount of Each Receipt this Period

25.98

C. Full Name (Last, First, Middle Initial)
BRUCE R GOLDBERG
Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.63

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790446

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

71.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BRUCE R GOLDBERG
Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.51

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829303

Amount of Each Receipt this Period

19.88

B. Full Name (Last, First, Middle Initial)
ANN A GOULD
Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790737

Amount of Each Receipt this Period

30.47

C. Full Name (Last, First, Middle Initial)
ANN A GOULD
Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.87

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829591

Amount of Each Receipt this Period

30.47

SUBTOTAL of Receipts This Page (optional)

80.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

KEVIN P GOW

Mailing Address 4 HAMPTON LANE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP AGENCY & CUSTOMER SUPP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.53

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790240

Amount of Each Receipt this Period

25.35

B. Full Name (Last, First, Middle Initial)

KEVIN P GOW

Mailing Address 4 HAMPTON LANE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP AGENCY & CUSTOMER SUPP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.88

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829097

Amount of Each Receipt this Period

25.35

C. Full Name (Last, First, Middle Initial)

GEORGE F GRAWE

Mailing Address 18799 GUNN HIGHWAY

City State Zip Code
 ODESSA FL 33556

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.40

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790374

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

70.58

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GEORGE F GRAWE

Mailing Address 18799 GUNN HIGHWAY

City State Zip Code
ODESSA FL 33556

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829231

Amount of Each Receipt this Period

19.88

B. Full Name (Last, First, Middle Initial)
PAMELA P GRAY

Mailing Address 50 E. BELLEVUE PL. #2402

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Data Center Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790651

Amount of Each Receipt this Period

24.24

C. Full Name (Last, First, Middle Initial)
PAMELA P GRAY

Mailing Address 50 E. BELLEVUE PL. #2402

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Data Center Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829507

Amount of Each Receipt this Period

24.24

SUBTOTAL of Receipts This Page (optional)

68.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

JUDITH P GREFFIN

Mailing Address 948 NORTH EUCLID AVENUE

City State Zip Code
 OAK PARK IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.33

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790401

Amount of Each Receipt this Period

37.96

B.

Full Name (Last, First, Middle Initial)

JUDITH P GREFFIN

Mailing Address 948 NORTH EUCLID AVENUE

City State Zip Code
 OAK PARK IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.29

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829258

Amount of Each Receipt this Period

37.96

C.

Full Name (Last, First, Middle Initial)

MARK A GRELLA

Mailing Address 1210 HADLEIGH DRIVE

City State Zip Code
 WEST CHESTER PA 19380

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.58

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790291

Amount of Each Receipt this Period

46.28

SUBTOTAL of Receipts This Page (optional)

122.20

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 82 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARK A GRELLA

Mailing Address 1210 HADLEIGH DRIVE

City State Zip Code
WEST CHESTER PA 19380

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.86

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829148

Amount of Each Receipt this Period

46.28

B. Full Name (Last, First, Middle Initial)
GREGORY J GUIDOS

Mailing Address 804 QUEENS HARBOR BLVD

City State Zip Code
JACKSONVILLE FL 32225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance AFW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.07

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790605

Amount of Each Receipt this Period

21.04

C. Full Name (Last, First, Middle Initial)
GREGORY J GUIDOS

Mailing Address 804 QUEENS HARBOR BLVD

City State Zip Code
JACKSONVILLE FL 32225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance AFW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829461

Amount of Each Receipt this Period

21.04

SUBTOTAL of Receipts This Page (optional)

88.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KIRK HAGGARD
Mailing Address 6608 OCASO DRIVE

City State Zip Code
CASTLE ROCK CO 80108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790733

Amount of Each Receipt this Period

26.04

B. Full Name (Last, First, Middle Initial)
KIRK HAGGARD
Mailing Address 6608 OCASO DRIVE

City State Zip Code
CASTLE ROCK CO 80108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829587

Amount of Each Receipt this Period

26.04

C. Full Name (Last, First, Middle Initial)
JAMES W HAIDU
Mailing Address 65 HILLBURN LN

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ivantage AVP Specialty Li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

493.99

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790551

Amount of Each Receipt this Period

50.61

SUBTOTAL of Receipts This Page (optional)

102.69

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES W HAIDU

Mailing Address 65 HILLBURN LN

City State Zip Code
 N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ivantage AVP Specialty Li

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.60

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829407

Amount of Each Receipt this Period

50.61

Full Name (Last, First, Middle Initial)

B. ROBERT F HAIR

Mailing Address 17 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.55

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790738

Amount of Each Receipt this Period

24.96

Full Name (Last, First, Middle Initial)

C. ROBERT F HAIR

Mailing Address 17 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.51

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829592

Amount of Each Receipt this Period

24.96

SUBTOTAL of Receipts This Page (optional)

100.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

DANNY L HALE

Mailing Address 1071 OLMSTED DRIVE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Chf Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1319.11

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790635

Amount of Each Receipt this Period

135.46

B. Full Name (Last, First, Middle Initial)

DANNY L HALE

Mailing Address 1071 OLMSTED DRIVE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Chf Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1454.57

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829491

Amount of Each Receipt this Period

135.46

C. Full Name (Last, First, Middle Initial)

RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.65

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790686

Amount of Each Receipt this Period

29.74

SUBTOTAL of Receipts This Page (optional)

300.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RANDALL M HANSON
 Mailing Address 840 ALLEGHANY

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.39

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829541

Amount of Each Receipt this Period

29.74

B. Full Name (Last, First, Middle Initial)
 HERBERT L HARRIS
 Mailing Address 1812 SOUTHVIEW CIRCLE

City State Zip Code
 BIRMINGHAM AL 35244

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.55

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790645

Amount of Each Receipt this Period

28.43

C. Full Name (Last, First, Middle Initial)
 HERBERT L HARRIS
 Mailing Address 1812 SOUTHVIEW CIRCLE

City State Zip Code
 BIRMINGHAM AL 35244

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.98

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829501

Amount of Each Receipt this Period

28.43

SUBTOTAL of Receipts This Page (optional)

86.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL L HARRISON

Mailing Address 1141 WINNERS CIRCLE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1321.20

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790747

Amount of Each Receipt this Period

132.55

Full Name (Last, First, Middle Initial)

B. MICHAEL L HARRISON

Mailing Address 1141 WINNERS CIRCLE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1453.75

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829601

Amount of Each Receipt this Period

132.55

Full Name (Last, First, Middle Initial)

C. DANIEL J HEBEL

Mailing Address 28365 West Big Hollow Road

City State Zip Code
 Ingleside IL 60041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.13

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790392

Amount of Each Receipt this Period

62.70

SUBTOTAL of Receipts This Page (optional)

327.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) DANIEL J HEBEL Mailing Address 28365 West Big Hollow Road City State Zip Code Ingleside IL 60041 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Vice President PCCSO Fiel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 672.83		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Transaction ID: A2006-829249 Amount of Each Receipt this Period 62.70
B. Full Name (Last, First, Middle Initial) RICHARD J HENEBERRY Mailing Address 23 CLAYTON City State Zip Code LAKE VILLA IL 60046 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation AVP Intract Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 226.07		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: A2006-790425 Amount of Each Receipt this Period 23.23
C. Full Name (Last, First, Middle Initial) RICHARD J HENEBERRY Mailing Address 23 CLAYTON City State Zip Code LAKE VILLA IL 60046 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation AVP Intract Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 249.30		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Transaction ID: A2006-829282 Amount of Each Receipt this Period 23.23

SUBTOTAL of Receipts This Page (optional)

109.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT L HERRING

Mailing Address 4337 SPRUCE BOUGH DR

City State Zip Code
MARIETTA GA 30062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Distribution Support Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.05

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790641

Amount of Each Receipt this Period

28.42

B. Full Name (Last, First, Middle Initial)
ROBERT L HERRING

Mailing Address 4337 SPRUCE BOUGH DR

City State Zip Code
MARIETTA GA 30062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Distribution Support Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.47

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829497

Amount of Each Receipt this Period

28.42

C. Full Name (Last, First, Middle Initial)
GEORGE A HIDES

Mailing Address 3211 ROYAL WOODS DRIVE

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.27

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829301

Amount of Each Receipt this Period

18.57

SUBTOTAL of Receipts This Page (optional)

75.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
WILLIAM G HILL
Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790346

Amount of Each Receipt this Period

77.28

B. Full Name (Last, First, Middle Initial)
WILLIAM G HILL
Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

652.34

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829203

Amount of Each Receipt this Period

77.28

C. Full Name (Last, First, Middle Initial)
MERRILD A HOOVER
Mailing Address 49 DORAL STREET

City State Zip Code
HURRICANE WV 25526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Market Distribution Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790351

Amount of Each Receipt this Period

22.46

SUBTOTAL of Receipts This Page (optional)

177.02

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MERRILD A HOOVER
Mailing Address 49 DORAL STREET

City State Zip Code
HURRICANE WV 25526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Market Distribution Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.06

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829208

Amount of Each Receipt this Period

22.46

B. Full Name (Last, First, Middle Initial)
DAVID W HORMEL
Mailing Address 179 SHEFFIELD LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Unclassified Management B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.52

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829295

Amount of Each Receipt this Period

21.36

C. Full Name (Last, First, Middle Initial)
MARY L HUBER
Mailing Address 1532 NORTH BELMONT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.13

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829488

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

63.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN J HUSTED

Mailing Address 11 RUTGERS COURT

City State Zip Code
 HAWTHORNE WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.70

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790253

Amount of Each Receipt this Period

39.76

Full Name (Last, First, Middle Initial)

B. JOHN J HUSTED

Mailing Address 11 RUTGERS COURT

City State Zip Code
 HAWTHORNE WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.46

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829110

Amount of Each Receipt this Period

39.76

Full Name (Last, First, Middle Initial)

C. DEBORAH R HUTSON

Mailing Address 1433 Kingsmill Court

City State Zip Code
 Coppell TX 75019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Procurement Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.88

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829162

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

99.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.49

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790526

Amount of Each Receipt this Period

39.77

B. Full Name (Last, First, Middle Initial)
STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829382

Amount of Each Receipt this Period

39.77

C. Full Name (Last, First, Middle Initial)
JEFFREY R ILL

Mailing Address 2775 SANDERS RD STE F5

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.83

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829350

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

99.42

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) LYNNE A IVERSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 890 BLAZING STAR TRAIL		Transaction ID: A2006-790476
City State Zip Code CARY IL 60013	Amount of Each Receipt this Period 26.27	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior Sourcing Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.30	

B. Full Name (Last, First, Middle Initial) LYNNE A IVERSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 890 BLAZING STAR TRAIL		Transaction ID: A2006-829333
City State Zip Code CARY IL 60013	Amount of Each Receipt this Period 26.27	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Senior Sourcing Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.57	

C. Full Name (Last, First, Middle Initial) BOB A JACKSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 226 Maison Court		Transaction ID: A2006-829551
City State Zip Code Altamonte Springs FL 32714	Amount of Each Receipt this Period 19.88	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Regional Distribution Lea	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.68	

SUBTOTAL of Receipts This Page (optional)

72.42

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES C JAMIESON

Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
F&P/Enterprise Risk Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.95

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790439

Amount of Each Receipt this Period

30.52

Full Name (Last, First, Middle Initial)

B. JAMES C JAMIESON

Mailing Address 25 BRUCE CIRCLE NORTH

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
F&P/Enterprise Risk Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.47

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829296

Amount of Each Receipt this Period

30.52

Full Name (Last, First, Middle Initial)

C. LARRY D JOHNSON

Mailing Address 21943 W VERNON RIDGE DRIVE

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Catastrophe Managemen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.46

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790418

Amount of Each Receipt this Period

51.96

SUBTOTAL of Receipts This Page (optional)

113.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LARRY D JOHNSON

Mailing Address 21943 W VERNON RIDGE DRIVE

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Catastrophe Managemen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.42

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829275

Amount of Each Receipt this Period

51.96

B. Full Name (Last, First, Middle Initial)
DOLORES M JOSSUND

Mailing Address 4242 W. HARRINGTON LANE

City State Zip Code
 CHICAGO IL 60646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.45

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790513

Amount of Each Receipt this Period

39.77

C. Full Name (Last, First, Middle Initial)
DOLORES M JOSSUND

Mailing Address 4242 W. HARRINGTON LANE

City State Zip Code
 CHICAGO IL 60646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.22

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829370

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

131.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFF L KAUFMAN

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
 PARKER CO 80134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.18

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790701

Amount of Each Receipt this Period

74.64

Full Name (Last, First, Middle Initial)

B. JEFF L KAUFMAN

Mailing Address 5271 SERENE VIEW WAY

City State Zip Code
 PARKER CO 80134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.82

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829556

Amount of Each Receipt this Period

74.64

Full Name (Last, First, Middle Initial)

C. TERRY KELAHER

Mailing Address 924 W. CHESTERFIELD CT.

City State Zip Code
 PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & General

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.44

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790522

Amount of Each Receipt this Period

78.13

SUBTOTAL of Receipts This Page (optional)

227.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TERRY KELAHER

Mailing Address 924 W. CHESTERFIELD CT.

City State Zip Code
PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & General

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.57

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829379

Amount of Each Receipt this Period

78.13

Full Name (Last, First, Middle Initial)

B. DAVID E KENNEY

Mailing Address 622 SEDGWICK DR.

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.43

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829409

Amount of Each Receipt this Period

19.43

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER R KIAH

Mailing Address 1975 ROSE TERRACE

City State Zip Code
RIVERWOODS IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790241

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

137.32

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHRISTOPHER R KIAH
Mailing Address 1975 ROSE TERRACE

City State Zip Code
RIVERWOODS IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829098

Amount of Each Receipt this Period

39.76

B. Full Name (Last, First, Middle Initial)
CURTIS L KIBLER
Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790442

Amount of Each Receipt this Period

35.14

C. Full Name (Last, First, Middle Initial)
CURTIS L KIBLER
Mailing Address 1332 BAY MEADOWS DR

City State Zip Code
BARTLETT IL 60103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829299

Amount of Each Receipt this Period

35.14

SUBTOTAL of Receipts This Page (optional)

110.04

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) PAUL N KIERIG		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 200 OXFORD RD		Transaction ID: A2006-790507
City State Zip Code Tower Lakes IL 60010	Amount of Each Receipt this Period 24.01	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.81	

B. Full Name (Last, First, Middle Initial) PAUL N KIERIG		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 200 OXFORD RD		Transaction ID: A2006-829364
City State Zip Code Tower Lakes IL 60010	Amount of Each Receipt this Period 24.01	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation AVP Ast General Counsel &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.82	

C. Full Name (Last, First, Middle Initial) JAMES P KING		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 592 TURNER AVENUE		Transaction ID: A2006-790585
City State Zip Code GLEN ELLYN IL 60137	Amount of Each Receipt this Period 34.45	
FEC ID number of contributing federal political committee. C		
Name of Employer Allstate Insurance Company	Occupation Home Office Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.70	

SUBTOTAL of Receipts This Page (optional)

82.47

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES P KING

Mailing Address 592 TURNER AVENUE

City State Zip Code
 GLEN ELLYN IL 60137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.15

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829441

Amount of Each Receipt this Period

34.45

Full Name (Last, First, Middle Initial)

B. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.45

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790683

Amount of Each Receipt this Period

26.66

Full Name (Last, First, Middle Initial)

C. MARY G KNIPP

Mailing Address 2050 GLENDALE AVENUE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Allstate Financial Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.41

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829287

Amount of Each Receipt this Period

19.66

SUBTOTAL of Receipts This Page (optional)

80.77

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.11

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829538

Amount of Each Receipt this Period

26.66

Full Name (Last, First, Middle Initial)

B. GARY L KOCHANЕК

Mailing Address 743 CARDIGAN CT

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790450

Amount of Each Receipt this Period

32.70

Full Name (Last, First, Middle Initial)

C. GARY L KOCHANЕК

Mailing Address 743 CARDIGAN CT

City State Zip Code
 NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.70

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829307

Amount of Each Receipt this Period

32.70

SUBTOTAL of Receipts This Page (optional)

92.06

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KAREN L KRAINZ
Mailing Address 23080 W MILTON ROAD

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.95

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790618

Amount of Each Receipt this Period

35.51

B. Full Name (Last, First, Middle Initial)
KAREN L KRAINZ
Mailing Address 23080 W MILTON ROAD

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.46

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829474

Amount of Each Receipt this Period

35.51

C. Full Name (Last, First, Middle Initial)
JOANNE L KRON
Mailing Address 341 N FIORE PARKWAY

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790445

Amount of Each Receipt this Period

39.77

SUBTOTAL of Receipts This Page (optional)

110.79

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOANNE L KRON

Mailing Address 341 N FIORE PARKWAY

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.27

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829302

Amount of Each Receipt this Period

39.77

Full Name (Last, First, Middle Initial)

B. MICHAEL A LA MONICA

Mailing Address 22401 BROOKSIDE WAY

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790511

Amount of Each Receipt this Period

65.33

Full Name (Last, First, Middle Initial)

C. MICHAEL A LA MONICA

Mailing Address 22401 BROOKSIDE WAY

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.33

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829368

Amount of Each Receipt this Period

65.33

SUBTOTAL of Receipts This Page (optional)

170.43

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANTHONY LASKA

Mailing Address 2707 SKYLINE DRIVE

City State Zip Code
 CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.70

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790268

Amount of Each Receipt this Period

42.67

Full Name (Last, First, Middle Initial)

B. ANTHONY LASKA

Mailing Address 2707 SKYLINE DRIVE

City State Zip Code
 CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.37

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829125

Amount of Each Receipt this Period

42.67

Full Name (Last, First, Middle Initial)

C. DEBORAH G LAWRENCE

Mailing Address 910 S MICHIGAN AVE #1501

City State Zip Code
 CHICAGO IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.68

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829274

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

105.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PHILLIP E LAWSON

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.46

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790689

Amount of Each Receipt this Period

69.56

B. Full Name (Last, First, Middle Initial)
PHILLIP E LAWSON

Mailing Address 900 PARK AVENUE NORTH

City State Zip Code
WINTER PARK FL 32789

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

751.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829544

Amount of Each Receipt this Period

69.56

C. Full Name (Last, First, Middle Initial)
CATHY A LAZAROFF

Mailing Address 910 S MICHIGAN AVE #1503

City State Zip Code
CHICAGO IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790254

Amount of Each Receipt this Period

55.62

SUBTOTAL of Receipts This Page (optional)

194.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CATHY A LAZAROFF

Mailing Address 910 S MICHIGAN AVE #1503

City State Zip Code
CHICAGO IL 60605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.88

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829111

Amount of Each Receipt this Period

55.62

B. Full Name (Last, First, Middle Initial)
MICHELLE LEE

Mailing Address 1404 100TH AVENUE NE

City State Zip Code
BELLEVUE WA 98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.41

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790740

Amount of Each Receipt this Period

54.04

C. Full Name (Last, First, Middle Initial)
MICHELLE LEE

Mailing Address 1404 100TH AVENUE NE

City State Zip Code
BELLEVUE WA 98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.45

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829594

Amount of Each Receipt this Period

54.04

SUBTOTAL of Receipts This Page (optional)

163.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SUSAN L LEES

Mailing Address 1705 DARTMOUTH LN

City State Zip Code
 DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.23

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790239

Amount of Each Receipt this Period

23.27

Full Name (Last, First, Middle Initial)

B. SUSAN L LEES

Mailing Address 1705 DARTMOUTH LN

City State Zip Code
 DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829096

Amount of Each Receipt this Period

23.27

Full Name (Last, First, Middle Initial)

C. ANDREW P LEICHT

Mailing Address 25658 N ARROWHEAD

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.90

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790456

Amount of Each Receipt this Period

32.69

SUBTOTAL of Receipts This Page (optional)

79.23

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANDREW P LEIGHT

Mailing Address 25658 N ARROWHEAD

City	State	Zip Code
MUNDELEIN	IL	60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829313

Amount of Each Receipt this Period

32.69

Full Name (Last, First, Middle Initial)

B. NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City	State	Zip Code
ACWORTH	GA	30101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.75

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790534

Amount of Each Receipt this Period

20.85

Full Name (Last, First, Middle Initial)

C. NANCY L LEMKE

Mailing Address 5697 BROOKSTONE WALK

City	State	Zip Code
ACWORTH	GA	30101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Senior Field Corporate Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829390

Amount of Each Receipt this Period

20.85

SUBTOTAL of Receipts This Page (optional)

74.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TERESA G LOGUE

Mailing Address 7187 PRESIDENTIAL DRIVE

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Direct Response

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.30

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790481

Amount of Each Receipt this Period

21.27

Full Name (Last, First, Middle Initial)

B. TERESA G LOGUE

Mailing Address 7187 PRESIDENTIAL DRIVE

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Direct Response

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.57

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829338

Amount of Each Receipt this Period

21.27

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER T LONGEWAY

Mailing Address 1134 W. PATTERSON #1

City State Zip Code
 CHICAGO IL 60613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.05

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790521

Amount of Each Receipt this Period

27.02

SUBTOTAL of Receipts This Page (optional)

69.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

CHRISTOPHER T LONGEWAY

Mailing Address 1134 W. PATTERSON #1

City State Zip Code
 CHICAGO IL 60613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.07

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829378

Amount of Each Receipt this Period

27.02

B. Full Name (Last, First, Middle Initial)

JOHN C LOUNDS

Mailing Address 4424 STONEHAVEN

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.60

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790616

Amount of Each Receipt this Period

35.40

C. Full Name (Last, First, Middle Initial)

JOHN C LOUNDS

Mailing Address 4424 STONEHAVEN

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Product AF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829472

Amount of Each Receipt this Period

35.40

SUBTOTAL of Receipts This Page (optional)

97.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) BENJAMIN E LUMICAO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 343 S. DEARBORN ST. APT. 504		
City	State	Zip Code
CHICAGO	IL	60604
FEC ID number of contributing federal political committee.		Transaction ID: A2006-790569
Amount of Each Receipt this Period		29.40
Name of Employer Allstate Insurance Company		Occupation Associate Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		288.10

B. Full Name (Last, First, Middle Initial) BENJAMIN E LUMICAO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 343 S. DEARBORN ST. APT. 504		
City	State	Zip Code
CHICAGO	IL	60604
FEC ID number of contributing federal political committee.		Transaction ID: A2006-829425
Amount of Each Receipt this Period		29.40
Name of Employer Allstate Insurance Company		Occupation Associate Counsel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		317.50

C. Full Name (Last, First, Middle Initial) DANIEL J MACDONALD		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6
Mailing Address 2250 RIDGETRAIL DR		
City	State	Zip Code
CASTLE ROCK	CO	80104
FEC ID number of contributing federal political committee.		Transaction ID: A2006-790630
Amount of Each Receipt this Period		22.96
Name of Employer Allstate Insurance Company		Occupation Regional Distribution Lea
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		227.35

SUBTOTAL of Receipts This Page (optional)

81.76

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DANIEL J MACDONALD
Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
CASTLE ROCK CO 80104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.31

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829486

Amount of Each Receipt this Period

22.96

B. Full Name (Last, First, Middle Initial)
MORRIS A MADURO
Mailing Address PO BOX 4343

City State Zip Code
NAPERVILLE IL 60567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.75

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790267

Amount of Each Receipt this Period

36.22

C. Full Name (Last, First, Middle Initial)
MORRIS A MADURO
Mailing Address PO BOX 4343

City State Zip Code
NAPERVILLE IL 60567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.97

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829124

Amount of Each Receipt this Period

36.22

SUBTOTAL of Receipts This Page (optional)

95.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS L MAIO

Mailing Address 1214 EAST CRABTREE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.30

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790482

Amount of Each Receipt this Period

26.03

Full Name (Last, First, Middle Initial)

B. THOMAS L MAIO

Mailing Address 1214 EAST CRABTREE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.33

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829339

Amount of Each Receipt this Period

26.03

Full Name (Last, First, Middle Initial)

C. FELIX A MANTILLA

Mailing Address 28601 N. Sky Crest Drive

City State Zip Code
 Ivanhoe IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.18

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790633

Amount of Each Receipt this Period

45.38

SUBTOTAL of Receipts This Page (optional)

97.44

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 FELIX A MANTILLA
 Mailing Address 28601 N. Sky Crest Drive

City State Zip Code
 Ivanhoe IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.56

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829489

Amount of Each Receipt this Period

45.38

B. Full Name (Last, First, Middle Initial)
 JOHN R MATHEWS
 Mailing Address 401 E NORTH AVENUE

City State Zip Code
 LAKE BLUFF IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.73

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790570

Amount of Each Receipt this Period

19.88

C. Full Name (Last, First, Middle Initial)
 JOHN R MATHEWS
 Mailing Address 401 E NORTH AVENUE

City State Zip Code
 LAKE BLUFF IL 60044

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.61

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829426

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

85.14

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL J MC CABE
Mailing Address 8 S. WYNSTONE DRIVE

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP & Chief Legal Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1092.51

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790704

Amount of Each Receipt this Period

115.39

B. Full Name (Last, First, Middle Initial)
MICHAEL J MC CABE
Mailing Address 8 S. WYNSTONE DRIVE

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP & Chief Legal Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1207.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829559

Amount of Each Receipt this Period

115.39

C. Full Name (Last, First, Middle Initial)
GERARD F MC DERMOTT
Mailing Address 5378 BLACK BEAR LANE

City State Zip Code
ROANOKE VA 24014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Operations Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.14

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790252

Amount of Each Receipt this Period

29.63

SUBTOTAL of Receipts This Page (optional)

260.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GERARD F MC DERMOTT

Mailing Address 5378 BLACK BEAR LANE

City State Zip Code
 ROANOKE VA 24014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Operations Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.77

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829109

Amount of Each Receipt this Period

29.63

B. Full Name (Last, First, Middle Initial)
MARY J MC GINN

Mailing Address 155 BUCKLEY ROAD

City State Zip Code
 BARRINGTON HILL IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.71

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790550

Amount of Each Receipt this Period

72.70

C. Full Name (Last, First, Middle Initial)
MARY J MC GINN

Mailing Address 155 BUCKLEY ROAD

City State Zip Code
 BARRINGTON HILL IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Deputy G

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

789.41

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829406

Amount of Each Receipt this Period

72.70

SUBTOTAL of Receipts This Page (optional)

175.03

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

DAVID A MC HALE

Mailing Address 8756 MAPLE HOLLOW CT.

City State Zip Code
 GRANITE BAY CA 95746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.01

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790483

Amount of Each Receipt this Period

53.02

B. Full Name (Last, First, Middle Initial)

DAVID A MC HALE

Mailing Address 8756 MAPLE HOLLOW CT.

City State Zip Code
 GRANITE BAY CA 95746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.03

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829340

Amount of Each Receipt this Period

53.02

C. Full Name (Last, First, Middle Initial)

JOHN A MC LAUGHLIN

Mailing Address 3851 N. Parkway Drive #21C

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.60

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790496

Amount of Each Receipt this Period

38.36

SUBTOTAL of Receipts This Page (optional)

144.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A MC LAUGHLIN

Mailing Address 3851 N. Parkway Drive #21C

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.96

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829353

Amount of Each Receipt this Period

38.36

Full Name (Last, First, Middle Initial)

B. PATRICIA M MCCARTHY

Mailing Address 222 STONE FENCE ROAD

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.48

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829141

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

C. CHARLTON T MCDONALD

Mailing Address 195 ALPINE DRIVE

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Insurance Reserve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.88

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790433

Amount of Each Receipt this Period

25.29

SUBTOTAL of Receipts This Page (optional)

83.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHARLTON T MCDONALD
Mailing Address 195 ALPINE DRIVE

City State Zip Code
LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Insurance Reserve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.17

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829290

Amount of Each Receipt this Period

25.29

B. Full Name (Last, First, Middle Initial)
MARK J MCDONNELL
Mailing Address 70 MC ECHRON LANE

City State Zip Code
QUEENSBURY NY 12804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.05

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790308

Amount of Each Receipt this Period

25.03

C. Full Name (Last, First, Middle Initial)
MARK J MCDONNELL
Mailing Address 70 MC ECHRON LANE

City State Zip Code
QUEENSBURY NY 12804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.08

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829165

Amount of Each Receipt this Period

25.03

SUBTOTAL of Receipts This Page (optional)

75.35

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.45

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829568

Amount of Each Receipt this Period

19.73

Full Name (Last, First, Middle Initial)

B. EVA M MCINTEE

Mailing Address 28 MANCERA

City State Zip Code
 RANCHO SANTA MA CA 92688

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.55

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790708

Amount of Each Receipt this Period

28.43

Full Name (Last, First, Middle Initial)

C. EVA M MCINTEE

Mailing Address 28 MANCERA

City State Zip Code
 RANCHO SANTA MA CA 92688

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.98

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829563

Amount of Each Receipt this Period

28.43

SUBTOTAL of Receipts This Page (optional)

76.59

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL MCKINNEY
Mailing Address 1207 DEVENS DRIVE

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.05

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790340

Amount of Each Receipt this Period

42.88

B. Full Name (Last, First, Middle Initial)
MICHAEL MCKINNEY
Mailing Address 1207 DEVENS DRIVE

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.93

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829197

Amount of Each Receipt this Period

42.88

C. Full Name (Last, First, Middle Initial)
RONALD D MCNEIL
Mailing Address 76 HILLBURN LANE

City State Zip Code
NO BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-Protection Distributi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.39

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790614

Amount of Each Receipt this Period

112.15

SUBTOTAL of Receipts This Page (optional)

197.91

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 228

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

RONALD D MCNEIL

Mailing Address 76 HILLBURN LANE

City State Zip Code
 NO BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-Protection Distributi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1207.54

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829470

Amount of Each Receipt this Period

112.15

B. Full Name (Last, First, Middle Initial)

JEFFREY J MCRAE

Mailing Address 1213 THORNDAL LN

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Finance Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.27

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829241

Amount of Each Receipt this Period

18.97

C. Full Name (Last, First, Middle Initial)

GARY A MELLINI

Mailing Address 21050 PRESTWICK DRIVE

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.63

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790260

Amount of Each Receipt this Period

31.31

SUBTOTAL of Receipts This Page (optional)

162.43

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GARY A MELLINI
Mailing Address 21050 PRESTWICK DRIVE

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.94

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829117

Amount of Each Receipt this Period

31.31

B. Full Name (Last, First, Middle Initial)
JANE M MELLON
Mailing Address 184 GARFIELD

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.65

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790468

Amount of Each Receipt this Period

38.82

C. Full Name (Last, First, Middle Initial)
JANE M MELLON
Mailing Address 184 GARFIELD

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.47

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829325

Amount of Each Receipt this Period

38.82

SUBTOTAL of Receipts This Page (optional)

108.95

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City State Zip Code
PROSPECT HTS IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Distribution Support Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.09

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829387

Amount of Each Receipt this Period

16.35

B. Full Name (Last, First, Middle Initial)
STEVEN M MILLER

Mailing Address 1625 THORNEAPPLE LANE

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.77

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829455

Amount of Each Receipt this Period

19.37

C. Full Name (Last, First, Middle Initial)
CHRISTINE K MINER

Mailing Address 25264 MCINTYRE SQUARE

City State Zip Code
SOUTH RIDING VA 20152

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790375

Amount of Each Receipt this Period

22.68

SUBTOTAL of Receipts This Page (optional)

58.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHRISTINE K MINER

Mailing Address 25264 MCINTYRE SQUARE

City State Zip Code
SOUTH RIDING VA 20152

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.03

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829232

Amount of Each Receipt this Period

22.68

B. Full Name (Last, First, Middle Initial)
NEIL J MINNICH

Mailing Address 405 N. WABASH AVE. UNIT 4210

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Underwriting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790246

Amount of Each Receipt this Period

39.63

C. Full Name (Last, First, Middle Initial)
NEIL J MINNICH

Mailing Address 405 N. WABASH AVE. UNIT 4210

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Underwriting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.03

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829103

Amount of Each Receipt this Period

39.63

SUBTOTAL of Receipts This Page (optional)

101.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LAWRENCE P MOEWS
Mailing Address 740 W. JENNIFER CT.

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.19

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790459

Amount of Each Receipt this Period

47.65

B. Full Name (Last, First, Middle Initial)
LAWRENCE P MOEWS
Mailing Address 740 W. JENNIFER CT.

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Investor R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

466.84

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829316

Amount of Each Receipt this Period

47.65

C. Full Name (Last, First, Middle Initial)
MARCIE E MOLEK
Mailing Address 400 KEVIN LANE

City State Zip Code
GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.06

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829335

Amount of Each Receipt this Period

19.95

SUBTOTAL of Receipts This Page (optional)

115.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWARD J MORAN
Mailing Address 131 ADELAIDE UNIT 406

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.15

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790330

Amount of Each Receipt this Period

47.22

B. Full Name (Last, First, Middle Initial)
EDWARD J MORAN
Mailing Address 131 ADELAIDE UNIT 406

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.37

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829187

Amount of Each Receipt this Period

47.22

C. Full Name (Last, First, Middle Initial)
KAREN S MORRIS
Mailing Address 27707 LA VISTA DRIVE

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790573

Amount of Each Receipt this Period

38.09

SUBTOTAL of Receipts This Page (optional)

132.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KAREN S MORRIS
Mailing Address 27707 LA VISTA DRIVE

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.39

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829429

Amount of Each Receipt this Period

38.09

B. Full Name (Last, First, Middle Initial)
LARRY E MOSER
Mailing Address 611 W. BURNING TREE LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790467

Amount of Each Receipt this Period

28.27

C. Full Name (Last, First, Middle Initial)
LARRY E MOSER
Mailing Address 611 W. BURNING TREE LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.87

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829324

Amount of Each Receipt this Period

28.27

SUBTOTAL of Receipts This Page (optional)

94.63

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MEGHAN O MULVIHILL
Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790337

Amount of Each Receipt this Period

27.92

B. Full Name (Last, First, Middle Initial)
MICHAEL F MULVIHILL
Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790452

Amount of Each Receipt this Period

35.26

C. Full Name (Last, First, Middle Initial)
MEGHAN O MULVIHILL
Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.12

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829194

Amount of Each Receipt this Period

27.92

SUBTOTAL of Receipts This Page (optional)

91.10

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829309

Amount of Each Receipt this Period

35.26

B. Full Name (Last, First, Middle Initial)
MICHAEL A MURPHY

Mailing Address 233 WOOD CREEK ROAD #305

City State Zip Code
WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790673

Amount of Each Receipt this Period

39.76

C. Full Name (Last, First, Middle Initial)
MICHAEL A MURPHY

Mailing Address 233 WOOD CREEK ROAD #305

City State Zip Code
WHEELING IL 60090

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829528

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

114.78

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID G NADIG
Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.29

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790593

Amount of Each Receipt this Period

46.23

B. Full Name (Last, First, Middle Initial)
DAVID G NADIG
Mailing Address 2950 LAKE PLACID

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829449

Amount of Each Receipt this Period

46.23

C. Full Name (Last, First, Middle Initial)
BRIAN J NAGEL
Mailing Address 1211 AIMTREE

City State Zip Code
SCHAUMBURG IL 60194

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.95

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790487

Amount of Each Receipt this Period

35.95

SUBTOTAL of Receipts This Page (optional)

128.41

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BRIAN J NAGEL

Mailing Address 1211 AIMTREE

City State Zip Code
 SCHAUMBURG IL 60194

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.90

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829344

Amount of Each Receipt this Period

35.95

B. Full Name (Last, First, Middle Initial)
JOAN M NAUGHTON-GERDES

Mailing Address 650 MALIBOU

City State Zip Code
 PALATINE IL 60074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.26

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829427

Amount of Each Receipt this Period

19.26

C. Full Name (Last, First, Middle Initial)
DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1019.25

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790434

Amount of Each Receipt this Period

104.62

SUBTOTAL of Receipts This Page (optional)

159.83

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DANIEL C NECASTRO
Mailing Address 22622 N. LINDEN DR

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1123.87

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829291

Amount of Each Receipt this Period

104.62

B. Full Name (Last, First, Middle Initial)
NEIL C NELSON
Mailing Address 2794 BRECKENRIDGE CIRCLE

City State Zip Code
AURORA IL 60504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.95

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790625

Amount of Each Receipt this Period

25.59

C. Full Name (Last, First, Middle Initial)
NEIL C NELSON
Mailing Address 2794 BRECKENRIDGE CIRCLE

City State Zip Code
AURORA IL 60504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.54

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829481

Amount of Each Receipt this Period

25.59

SUBTOTAL of Receipts This Page (optional)

155.80

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City State Zip Code
DEER PARK IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790674

Amount of Each Receipt this Period

21.77

B. Full Name (Last, First, Middle Initial)
PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City State Zip Code
DEER PARK IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Human Resource Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829529

Amount of Each Receipt this Period

21.77

C. Full Name (Last, First, Middle Initial)
JO B NORTON

Mailing Address 611 WESTBROOK DRIVE

City State Zip Code
AUSTIN TX 78746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.85

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790664

Amount of Each Receipt this Period

24.60

SUBTOTAL of Receipts This Page (optional)

68.14

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JO B NORTON

Mailing Address 611 WESTBROOK DRIVE

City State Zip Code
AUSTIN TX 78746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.45

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829519

Amount of Each Receipt this Period

24.60

Full Name (Last, First, Middle Initial)

B. BRENDAN D O'CONNELL

Mailing Address 13025 21ST STREET

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790580

Amount of Each Receipt this Period

31.03

Full Name (Last, First, Middle Initial)

C. BRENDAN D O'CONNELL

Mailing Address 13025 21ST STREET

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.92

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829436

Amount of Each Receipt this Period

68.62

SUBTOTAL of Receipts This Page (optional)

124.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BRIAN M O'DELL
Mailing Address 3434 WHITE ADMIRAL COURT

City State Zip Code
EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790342

Amount of Each Receipt this Period

31.32

B. Full Name (Last, First, Middle Initial)
BRIAN M O'DELL
Mailing Address 3434 WHITE ADMIRAL COURT

City State Zip Code
EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829199

Amount of Each Receipt this Period

31.32

C. Full Name (Last, First, Middle Initial)
MICHAEL P O'SHEA
Mailing Address 2505 NEWPORT DRIVE

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Agency Consulting Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.65

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790286

Amount of Each Receipt this Period

24.54

SUBTOTAL of Receipts This Page (optional)

87.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL P O'SHEA
Mailing Address 2505 NEWPORT DRIVE

City State Zip Code
NAPERVILLE IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Agency Consulting Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.19

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829143

Amount of Each Receipt this Period

24.54

B. Full Name (Last, First, Middle Initial)
ROGER D ODLE II
Mailing Address 5170 BARCROFT DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790557

Amount of Each Receipt this Period

29.51

C. Full Name (Last, First, Middle Initial)
ROGER D ODLE II
Mailing Address 5170 BARCROFT DRIVE

City State Zip Code
HOFFMAN ESTATES IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.21

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829413

Amount of Each Receipt this Period

29.51

SUBTOTAL of Receipts This Page (optional)

83.56

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

KATHY A OLCESE

Mailing Address 35 YORK ST

City State Zip Code
 HUDSON OH 44236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Risk Management Busin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.98

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790415

Amount of Each Receipt this Period

22.20

B. Full Name (Last, First, Middle Initial)

KATHY A OLCESE

Mailing Address 35 YORK ST

City State Zip Code
 HUDSON OH 44236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Risk Management Busin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.18

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829272

Amount of Each Receipt this Period

22.20

C. Full Name (Last, First, Middle Initial)

CRAIG A OLDHAM

Mailing Address 2606 N Paulina ST

City State Zip Code
 CHICAGO IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.30

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790640

Amount of Each Receipt this Period

32.40

SUBTOTAL of Receipts This Page (optional)

76.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CRAIG A OLDHAM
Mailing Address 2606 N Paulina ST

City State Zip Code
CHICAGO IL 60614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.70

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829496

Amount of Each Receipt this Period

32.40

B. Full Name (Last, First, Middle Initial)
AL W OLSSON JR
Mailing Address 1524 BONHAM CT

City State Zip Code
IRVING TX 75038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Data Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.21

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790248

Amount of Each Receipt this Period

56.38

C. Full Name (Last, First, Middle Initial)
AL W OLSSON JR
Mailing Address 1524 BONHAM CT

City State Zip Code
IRVING TX 75038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Data Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.59

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829105

Amount of Each Receipt this Period

56.38

SUBTOTAL of Receipts This Page (optional)

145.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.18

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790661

Amount of Each Receipt this Period

60.96

Full Name (Last, First, Middle Initial)

B. JAMES L OSBORNE

Mailing Address 1224 ST. WILLIAM

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

656.14

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829516

Amount of Each Receipt this Period

60.96

Full Name (Last, First, Middle Initial)

C. PAMELA J OVERTON

Mailing Address 9352 ANSLEY LANE

City State Zip Code
 BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.55

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790382

Amount of Each Receipt this Period

34.58

SUBTOTAL of Receipts This Page (optional)

156.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PAMELA J OVERTON

Mailing Address 9352 ANSLEY LANE

City State Zip Code
BRENTWOOD TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.13

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829239

Amount of Each Receipt this Period

34.58

B. Full Name (Last, First, Middle Initial)
GEORGE H OXENDINE

Mailing Address 1 SOUTH HIGHLAND AVENUE #603

City State Zip Code
ARLINGTON HEIGHTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790359

Amount of Each Receipt this Period

25.94

C. Full Name (Last, First, Middle Initial)
GEORGE H OXENDINE

Mailing Address 1 SOUTH HIGHLAND AVENUE #603

City State Zip Code
ARLINGTON HEIGHTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829216

Amount of Each Receipt this Period

25.94

SUBTOTAL of Receipts This Page (optional)

86.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALAN D PAGE

Mailing Address 13530 LUCKY LAKE DRIVE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.99

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790734

Amount of Each Receipt this Period

34.62

Full Name (Last, First, Middle Initial)

B. ALAN D PAGE

Mailing Address 13530 LUCKY LAKE DRIVE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.61

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829588

Amount of Each Receipt this Period

34.62

Full Name (Last, First, Middle Initial)

C. DEAN T PAPPAS

Mailing Address 3406 VICEROY COURT

City State Zip Code
 EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.95

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790332

Amount of Each Receipt this Period

39.25

SUBTOTAL of Receipts This Page (optional)

108.49

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DEAN T PAPPAS
Mailing Address 3406 VICEROY COURT

City State Zip Code
EDGEWATER MD 21037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829189

Amount of Each Receipt this Period

39.25

B. Full Name (Last, First, Middle Initial)
ROBERT L PARK
Mailing Address 1107 BONITA DRIVE

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Public Relations Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.44

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790558

Amount of Each Receipt this Period

50.98

C. Full Name (Last, First, Middle Initial)
ROBERT L PARK
Mailing Address 1107 BONITA DRIVE

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Public Relations Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.42

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829414

Amount of Each Receipt this Period

50.98

SUBTOTAL of Receipts This Page (optional)

141.21

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROGER D PARKER
 Mailing Address 1305 N MAIDSTONE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.24

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790727

Amount of Each Receipt this Period

46.17

B. Full Name (Last, First, Middle Initial)
 ROGER D PARKER
 Mailing Address 1305 N MAIDSTONE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.41

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829582

Amount of Each Receipt this Period

46.17

C. Full Name (Last, First, Middle Initial)
 MAYUR M PATEL
 Mailing Address 742 E PARKVIEW CT

City State Zip Code
 ROSELLE IL 60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.80

Date of Receipt

M M / D D / Y Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790490

Amount of Each Receipt this Period

28.89

SUBTOTAL of Receipts This Page (optional)

121.23

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MAYUR M PATEL
Mailing Address 742 E PARKVIEW CT

City State Zip Code
ROSELLE IL 60172

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.69

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829347

Amount of Each Receipt this Period

28.89

B. Full Name (Last, First, Middle Initial)
BARRY S PAUL
Mailing Address 3010 LILAC LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Assistant Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790311

Amount of Each Receipt this Period

31.44

C. Full Name (Last, First, Middle Initial)
CHARLES PAUL
Mailing Address 301 CAMELOT LANE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Stra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.85

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790316

Amount of Each Receipt this Period

66.19

SUBTOTAL of Receipts This Page (optional)

126.52

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BARRY S PAUL
Mailing Address 3010 LILAC LANE

City State Zip Code
NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP & Assistant Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.54

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829168

Amount of Each Receipt this Period

31.44

B. Full Name (Last, First, Middle Initial)
CHARLES PAUL
Mailing Address 301 CAMELOT LANE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Stra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

706.04

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829173

Amount of Each Receipt this Period

66.19

C. Full Name (Last, First, Middle Initial)
RONALD J PEPPING
Mailing Address 934 LEWIS PLACE

City State Zip Code
GENEVA IL 60134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ivantage Financial Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790532

Amount of Each Receipt this Period

28.43

SUBTOTAL of Receipts This Page (optional)

126.06

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

RONALD J PEPPING

Mailing Address 934 LEWIS PLACE

City State Zip Code
 GENEVA IL 60134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Ivantage Financial Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.98

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829388

Amount of Each Receipt this Period

28.43

B. Full Name (Last, First, Middle Initial)

FLORIE S PERELLIS

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.02

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790274

Amount of Each Receipt this Period

45.69

C. Full Name (Last, First, Middle Initial)

FLORIE S PERELLIS

Mailing Address 1480 MINTHAVEN RD

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.71

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829131

Amount of Each Receipt this Period

45.69

SUBTOTAL of Receipts This Page (optional)

119.81

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A.

Full Name (Last, First, Middle Initial)

STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.43

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790273

Amount of Each Receipt this Period

47.19

B.

Full Name (Last, First, Middle Initial)

STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.62

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829130

Amount of Each Receipt this Period

47.19

C.

Full Name (Last, First, Middle Initial)

JAMES M PLOTTS

Mailing Address 1651 TIMBER WOODS LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation

GVP-AGENCY & CUSTOMER SUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

707.61

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790600

Amount of Each Receipt this Period

72.70

SUBTOTAL of Receipts This Page (optional)

167.08

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES M PLOTTS

Mailing Address 1651 TIMBER WOODS LANE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
GVP-AGENCY & CUSTOMER SUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.31

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829456

Amount of Each Receipt this Period

72.70

Full Name (Last, First, Middle Initial)

B. CINDY D POWELL

Mailing Address 227 WHITE FENCE CT.

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.42

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829502

Amount of Each Receipt this Period

19.87

Full Name (Last, First, Middle Initial)

C. DAVID J PRENDERGAST

Mailing Address 2816 HAVEN LANE

City State Zip Code
 LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.10

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790265

Amount of Each Receipt this Period

35.25

SUBTOTAL of Receipts This Page (optional)

127.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID J PRENDERGAST

Mailing Address 2816 HAVEN LANE

City State Zip Code
 LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Regional Distribution Lea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.35

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829122

Amount of Each Receipt this Period

35.25

B. Full Name (Last, First, Middle Initial)
MARTIN PRZYGODA

Mailing Address 17516 KATIE COURT

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.52

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790447

Amount of Each Receipt this Period

26.78

C. Full Name (Last, First, Middle Initial)
MARTIN PRZYGODA

Mailing Address 17516 KATIE COURT

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance and Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.30

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829304

Amount of Each Receipt this Period

26.78

SUBTOTAL of Receipts This Page (optional)

88.81

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City State Zip Code
 DEER PARK IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.35

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790590

Amount of Each Receipt this Period

20.38

Full Name (Last, First, Middle Initial)

B. THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City State Zip Code
 DEER PARK IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.73

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829446

Amount of Each Receipt this Period

20.38

Full Name (Last, First, Middle Initial)

C. JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City State Zip Code
 ARLINGTON HGTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.25

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790744

Amount of Each Receipt this Period

26.74

SUBTOTAL of Receipts This Page (optional)

67.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JORGE A QUEZADA

Mailing Address 1407 W. GROVE ST

City State Zip Code
 ARLINGTON HGTS IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.99

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829598

Amount of Each Receipt this Period

26.74

Full Name (Last, First, Middle Initial)

B. ROBERT M RASNICK

Mailing Address 193 FOXFIRE RD

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Administration Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.68

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829147

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

C. JOSEPH P RATH

Mailing Address 359 STAFFORD COURT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.03

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790398

Amount of Each Receipt this Period

54.32

SUBTOTAL of Receipts This Page (optional)

100.94

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOSEPH P RATH

Mailing Address 359 STAFFORD COURT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.35

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829255

Amount of Each Receipt this Period

54.32

Full Name (Last, First, Middle Initial)

B. JOHN B REARDON

Mailing Address 441 KELLY LANE

City State Zip Code
 CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.50

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790249

Amount of Each Receipt this Period

38.15

Full Name (Last, First, Middle Initial)

C. JOHN B REARDON

Mailing Address 441 KELLY LANE

City State Zip Code
 CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.65

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829106

Amount of Each Receipt this Period

38.15

SUBTOTAL of Receipts This Page (optional)

130.62

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOSEPH J RICHARDSON

Mailing Address 1411 PARSONS LANE

City State Zip Code
 LOWER GWYNEDD PA 19002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.41

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790320

Amount of Each Receipt this Period

61.70

Full Name (Last, First, Middle Initial)

B. JOSEPH J RICHARDSON

Mailing Address 1411 PARSONS LANE

City State Zip Code
 LOWER GWYNEDD PA 19002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.11

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829177

Amount of Each Receipt this Period

61.70

Full Name (Last, First, Middle Initial)

C. ROBIN R RICHMOND

Mailing Address 9 HAWTHORN GROVE CIRCLE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.20

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790582

Amount of Each Receipt this Period

24.68

SUBTOTAL of Receipts This Page (optional)

148.08

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) ROBIN R RICHMOND			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 9 HAWTHORN GROVE CIRCLE			Transaction ID: A2006-829438	
City State Zip Code HAWTHORN WOODS IL 60047			Amount of Each Receipt this Period 24.68	
FEC ID number of contributing federal political committee. C				
Name of Employer Allstate Insurance Company		Occupation AVP Technology Shared Ser		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.88		
B. Full Name (Last, First, Middle Initial) ANDREW T RIEDER			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6	
Mailing Address 7 ONEIDA LANE			Transaction ID: A2006-790325	
City State Zip Code HAWTHORN WOODS IL 60047			Amount of Each Receipt this Period 45.35	
FEC ID number of contributing federal political committee. C				
Name of Employer Allstate Insurance Company		Occupation AVP Homeowner Initiative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 444.26		
C. Full Name (Last, First, Middle Initial) ANDREW T RIEDER			Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 7 ONEIDA LANE			Transaction ID: A2006-829182	
City State Zip Code HAWTHORN WOODS IL 60047			Amount of Each Receipt this Period 45.35	
FEC ID number of contributing federal political committee. C				
Name of Employer Allstate Insurance Company		Occupation AVP Homeowner Initiative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 489.61		

SUBTOTAL of Receipts This Page (optional)

115.38

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JESSICA D RIVERA

Mailing Address 2055 LOCKRIDGE PLACE

City State Zip Code
 EL DORADO HILLS CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.79

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790739

Amount of Each Receipt this Period

45.25

Full Name (Last, First, Middle Initial)

B. JESSICA D RIVERA

Mailing Address 2055 LOCKRIDGE PLACE

City State Zip Code
 EL DORADO HILLS CA 95762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Corporate Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.04

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829593

Amount of Each Receipt this Period

45.25

Full Name (Last, First, Middle Initial)

C. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City State Zip Code
 OAK LAWN IL 60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.63

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790509

Amount of Each Receipt this Period

38.30

SUBTOTAL of Receipts This Page (optional)

128.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARIO RIZZO
Mailing Address 5926 W. 90TH PLACE

City State Zip Code
OAK LAWN IL 60453

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Property & Casualty F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.93

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829366

Amount of Each Receipt this Period

38.30

B. Full Name (Last, First, Middle Initial)
THOMAS H ROBERTS
Mailing Address 5273 W. EMERSON AVE.

City State Zip Code
PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.80

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790612

Amount of Each Receipt this Period

28.88

C. Full Name (Last, First, Middle Initial)
CLAY F ROBERTS
Mailing Address 387 Long Hill Road

City State Zip Code
Gurnee IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790728

Amount of Each Receipt this Period

32.70

SUBTOTAL of Receipts This Page (optional)

99.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DANIEL P ROBERTS

Mailing Address 4374 W Anderson Rd

City State Zip Code
 South Euclid OH 44121

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.85

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829170

Amount of Each Receipt this Period

20.25

Full Name (Last, First, Middle Initial)

B. THOMAS H ROBERTS

Mailing Address 5273 W. EMERSON AVE.

City State Zip Code
 PALATINE IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.68

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829468

Amount of Each Receipt this Period

28.88

Full Name (Last, First, Middle Initial)

C. CLAY F ROBERTS

Mailing Address 387 Long Hill Road

City State Zip Code
 Gurnee IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Planning Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.05

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829583

Amount of Each Receipt this Period

32.70

SUBTOTAL of Receipts This Page (optional)

81.83

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

Transaction ID: A2006-790429

Amount of Each Receipt this Period

39.77

B. Full Name (Last, First, Middle Initial)

GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City	State	Zip Code
RIVER FOREST	IL	60305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	6	/	2	0	0	6

Transaction ID: A2006-829286

Amount of Each Receipt this Period

39.77

C. Full Name (Last, First, Middle Initial)

DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City	State	Zip Code
HINSDALE	IL	60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

Transaction ID: A2006-790518

Amount of Each Receipt this Period

25.95

SUBTOTAL of Receipts This Page (optional)

105.49

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DONNA J ROSEMEYER

Mailing Address 810 S THURLOW STREET

City State Zip Code
HINSDALE IL 60521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President PCCSO Fiel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.58

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829375

Amount of Each Receipt this Period

25.95

B. Full Name (Last, First, Middle Initial)
GEORGE E RUEBENSON

Mailing Address 29 FOX TR

City State Zip Code
LINCOLNSHIRE IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-P-CCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

871.11

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790577

Amount of Each Receipt this Period

91.15

C. Full Name (Last, First, Middle Initial)
GEORGE E RUEBENSON

Mailing Address 29 FOX TR

City State Zip Code
LINCOLNSHIRE IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-P-CCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

962.26

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829433

Amount of Each Receipt this Period

91.15

SUBTOTAL of Receipts This Page (optional)

208.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DOREEN M RYAN
Mailing Address 17 ALSTON COURT

City State Zip Code
RED BANK NJ 07701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790306

Amount of Each Receipt this Period

21.80

B. Full Name (Last, First, Middle Initial)
DOREEN M RYAN
Mailing Address 17 ALSTON COURT

City State Zip Code
RED BANK NJ 07701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Managing Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.80

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829163

Amount of Each Receipt this Period

21.80

C. Full Name (Last, First, Middle Initial)
PAUL R RYSKE
Mailing Address 898 E. LONGWOOD DR.

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.34

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790427

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

63.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 163 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

PAUL R RYSKE

Mailing Address 898 E. LONGWOOD DR.

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.22

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829284

Amount of Each Receipt this Period

19.88

B. Full Name (Last, First, Middle Initial)

MICHAEL A SCARDINA

Mailing Address 51 SOUTH ROYAL OAK

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.71

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790400

Amount of Each Receipt this Period

27.73

C. Full Name (Last, First, Middle Initial)

MICHAEL A SCARDINA

Mailing Address 51 SOUTH ROYAL OAK

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.44

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829257

Amount of Each Receipt this Period

27.73

SUBTOTAL of Receipts This Page (optional)

75.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 164 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DOUGLAS A SCHAEN

Mailing Address 40392 N SUNSET COURT

City State Zip Code
 ANTIOCH IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.05

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790552

Amount of Each Receipt this Period

23.04

Full Name (Last, First, Middle Initial)

B. DOUGLAS A SCHAEN

Mailing Address 40392 N SUNSET COURT

City State Zip Code
 ANTIOCH IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AF Operations Dept Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.09

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829408

Amount of Each Receipt this Period

23.04

Full Name (Last, First, Middle Initial)

C. PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.95

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790563

Amount of Each Receipt this Period

27.66

SUBTOTAL of Receipts This Page (optional)

73.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 165 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 PATRICK J SCHNEIDER
 Mailing Address 210 NORTH TRAIL

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.61

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829419

Amount of Each Receipt this Period

27.66

B. Full Name (Last, First, Middle Initial)
 STEPHEN E SCHOLL
 Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP HR Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.73

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790309

Amount of Each Receipt this Period

47.97

C. Full Name (Last, First, Middle Initial)
 STEPHEN E SCHOLL
 Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code
 HAWTHORN WOODS IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP HR Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.70

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829166

Amount of Each Receipt this Period

47.97

SUBTOTAL of Receipts This Page (optional)

123.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 166 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City State Zip Code
 BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790484

Amount of Each Receipt this Period

21.24

B. Full Name (Last, First, Middle Initial)

DAVID I SCHUR

Mailing Address 1216 SANDHURST DRIVE

City State Zip Code
 BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.59

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829341

Amount of Each Receipt this Period

21.24

C. Full Name (Last, First, Middle Initial)

DAVID J SCHWARTZER

Mailing Address 1911 205TH PL NE

City State Zip Code
 SAMMAMISH WA 98074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.99

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790629

Amount of Each Receipt this Period

38.89

SUBTOTAL of Receipts This Page (optional)

81.37

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 167 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DAVID J SCHWARTZER
Mailing Address 1911 205TH PL NE

City State Zip Code
SAMMAMISH WA 98074

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.88

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829485

Amount of Each Receipt this Period

38.89

B. Full Name (Last, First, Middle Initial)
ROBERT M SCULLY
Mailing Address 302 NORTH VILLAGE ST

City State Zip Code
CELEBRATION FL 34747

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Field Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.88

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829123

Amount of Each Receipt this Period

19.88

C. Full Name (Last, First, Middle Initial)
DANNY R SELLERS
Mailing Address 5903 87TH ST

City State Zip Code
LUBBOCK TX 79424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.25

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790665

Amount of Each Receipt this Period

23.16

SUBTOTAL of Receipts This Page (optional)

81.93

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

DANNY R SELLERS

Mailing Address 5903 87TH ST

City State Zip Code
 LUBBOCK TX 79424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.41

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829520

Amount of Each Receipt this Period

23.16

B. Full Name (Last, First, Middle Initial)

STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City State Zip Code
 Chicago IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.50

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790549

Amount of Each Receipt this Period

29.25

C. Full Name (Last, First, Middle Initial)

STACY Y SHARPE

Mailing Address 2 E. Erie #1506

City State Zip Code
 Chicago IL 60611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.75

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829405

Amount of Each Receipt this Period

29.25

SUBTOTAL of Receipts This Page (optional)

81.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Property/C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.16

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790517

Amount of Each Receipt this Period

76.15

Full Name (Last, First, Middle Initial)

B. STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City State Zip Code
WHEATON IL 60187

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Property/C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.31

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829374

Amount of Each Receipt this Period

76.15

Full Name (Last, First, Middle Initial)

C. MARY C SHEEHY

Mailing Address 708 S SEE-GWUN AVE

City State Zip Code
MT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.73

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790474

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

172.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MARY C SHEEHY
Mailing Address 708 S SEE-GWUN AVE

City State Zip Code
MT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.61

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829331

Amount of Each Receipt this Period

19.88

B. Full Name (Last, First, Middle Initial)
STEVEN R SHEFFEY
Mailing Address 839 SUMAC

City State Zip Code
HIGHLAND PARK IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.82

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829278

Amount of Each Receipt this Period

19.22

C. Full Name (Last, First, Middle Initial)
DENIS C SHUNTA
Mailing Address 5200 RIDGEGATE WAY

City State Zip Code
FAIR OAKS CA 95628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790603

Amount of Each Receipt this Period

21.76

SUBTOTAL of Receipts This Page (optional)

60.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
DENIS C SHUNTA
Mailing Address 5200 RIDGEGATE WAY

City State Zip Code
FAIR OAKS CA 95628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.36

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829459

Amount of Each Receipt this Period

21.76

B. Full Name (Last, First, Middle Initial)
DAVID J SILVERMAN
Mailing Address 382 BARN SWALLOW LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790601

Amount of Each Receipt this Period

33.14

C. Full Name (Last, First, Middle Initial)
DAVID J SILVERMAN
Mailing Address 382 BARN SWALLOW LANE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.54

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829457

Amount of Each Receipt this Period

33.14

SUBTOTAL of Receipts This Page (optional)

88.04

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT L SIMMONS
Mailing Address 418 DEUCE DRIVE

City State Zip Code
WALL NJ 07719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790296

Amount of Each Receipt this Period

27.47

B. Full Name (Last, First, Middle Initial)
ROBERT L SIMMONS
Mailing Address 418 DEUCE DRIVE

City State Zip Code
WALL NJ 07719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.87

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829153

Amount of Each Receipt this Period

27.47

C. Full Name (Last, First, Middle Initial)
KIMBALL S SIMON
Mailing Address 11 WEHRHEIM

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.20

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790695

Amount of Each Receipt this Period

34.98

SUBTOTAL of Receipts This Page (optional)

89.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KIMBALL S SIMON

Mailing Address 11 WEHRHEIM

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.18

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829550

Amount of Each Receipt this Period

34.98

B. Full Name (Last, First, Middle Initial)
ANNE E SIMPSON

Mailing Address 632 ONWENTSIA AVENUE

City State Zip Code
HIGHLAND PARK IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790432

Amount of Each Receipt this Period

26.51

C. Full Name (Last, First, Middle Initial)
ANNE E SIMPSON

Mailing Address 632 ONWENTSIA AVENUE

City State Zip Code
HIGHLAND PARK IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.01

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829289

Amount of Each Receipt this Period

26.51

SUBTOTAL of Receipts This Page (optional)

88.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

DAVID N SITZ

Mailing Address 519A CHICAGO AVE.

City State Zip Code
 EVANSTON IL 60202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.30

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790443

Amount of Each Receipt this Period

25.07

B. Full Name (Last, First, Middle Initial)

DAVID N SITZ

Mailing Address 519A CHICAGO AVE.

City State Zip Code
 EVANSTON IL 60202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Associate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.37

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829300

Amount of Each Receipt this Period

25.07

C. Full Name (Last, First, Middle Initial)

KEVIN R SLAWIN

Mailing Address 1316 CRESTWOOD DRIVE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP AF Admin Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.65

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790560

Amount of Each Receipt this Period

39.03

SUBTOTAL of Receipts This Page (optional)

89.17

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 175 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

KEVIN R SLAWIN

Mailing Address 1316 CRESTWOOD DRIVE

City State Zip Code
 NORTHBROOK IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP AF Admin Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.68

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829416

Amount of Each Receipt this Period

39.03

B. Full Name (Last, First, Middle Initial)

KIMBERLY J SLOANE

Mailing Address 378 N. VISTA AVE

City State Zip Code
 LOMBARD IL 60148

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.30

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790538

Amount of Each Receipt this Period

36.26

C. Full Name (Last, First, Middle Initial)

KIMBERLY J SLOANE

Mailing Address 378 N. VISTA AVE

City State Zip Code
 LOMBARD IL 60148

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.56

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829394

Amount of Each Receipt this Period

36.26

SUBTOTAL of Receipts This Page (optional)

111.55

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN R SMITH

Mailing Address BOX 5916 RFD

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-AGENCY & CUSTOMER SUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.21

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790350

Amount of Each Receipt this Period

50.55

Full Name (Last, First, Middle Initial)

B. SUZANNE C SMITH

Mailing Address 1061 PRAIRIE AVENUE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.83

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790504

Amount of Each Receipt this Period

39.76

Full Name (Last, First, Middle Initial)

C. J E SMITH

Mailing Address 310 WHITMORE LANE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Distribution and Chann

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.87

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790520

Amount of Each Receipt this Period

57.05

SUBTOTAL of Receipts This Page (optional)

147.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN R SMITH

Mailing Address BOX 5916 RFD

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-AGENCY & CUSTOMER SUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.76

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829207

Amount of Each Receipt this Period

50.55

Full Name (Last, First, Middle Initial)

B. SUZANNE C SMITH

Mailing Address 1061 PRAIRIE AVENUE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Sales Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.59

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829361

Amount of Each Receipt this Period

39.76

Full Name (Last, First, Middle Initial)

C. J E SMITH

Mailing Address 310 WHITMORE LANE

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Distribution and Chann

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.92

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829377

Amount of Each Receipt this Period

57.05

SUBTOTAL of Receipts This Page (optional)

147.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RANDALL D SNITTJER
 Mailing Address 11423 E. Blue Sky Drive

City State Zip Code
 Scottsdale AZ 85262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.90

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790684

Amount of Each Receipt this Period

25.58

B. Full Name (Last, First, Middle Initial)
 RANDALL D SNITTJER
 Mailing Address 11423 E. Blue Sky Drive

City State Zip Code
 Scottsdale AZ 85262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.48

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829539

Amount of Each Receipt this Period

25.58

C. Full Name (Last, First, Middle Initial)
 STEVEN P SORENSON
 Mailing Address 20712 High Ridge Dr

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.13

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790617

Amount of Each Receipt this Period

70.90

SUBTOTAL of Receipts This Page (optional)

122.06

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-Agency Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

763.03

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829473

Amount of Each Receipt this Period

70.90

B. Full Name (Last, First, Middle Initial)
KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City State Zip Code
GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Account Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.71

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790584

Amount of Each Receipt this Period

25.31

C. Full Name (Last, First, Middle Initial)
KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City State Zip Code
GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Account Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.02

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829440

Amount of Each Receipt this Period

25.31

SUBTOTAL of Receipts This Page (optional)

121.52

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWIN M SPECHT
Mailing Address 740 AMBRIA DRIVE

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790329

Amount of Each Receipt this Period

32.98

B. Full Name (Last, First, Middle Initial)
EDWIN M SPECHT
Mailing Address 740 AMBRIA DRIVE

City State Zip Code
MUNDELEIN IL 60060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.53

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829186

Amount of Each Receipt this Period

32.98

C. Full Name (Last, First, Middle Initial)
JAMES G SPORLEDER
Mailing Address 20 LAKESIDE LANE

City State Zip Code
N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.01

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790576

Amount of Each Receipt this Period

25.90

SUBTOTAL of Receipts This Page (optional)

91.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES G SPORLEDER

Mailing Address 20 LAKESIDE LANE

City State Zip Code
 N. BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.91

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829432

Amount of Each Receipt this Period

25.90

Full Name (Last, First, Middle Initial)

B. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.92

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790404

Amount of Each Receipt this Period

37.99

Full Name (Last, First, Middle Initial)

C. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code
 GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Technology Shared Ser

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.91

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829261

Amount of Each Receipt this Period

37.99

SUBTOTAL of Receipts This Page (optional)

101.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EMORY D STEPHENS JR

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.52

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790357

Amount of Each Receipt this Period

37.38

B. Full Name (Last, First, Middle Initial)
EMORY D STEPHENS JR

Mailing Address 4711 N WOLCOTT AVE

City State Zip Code
CHICAGO IL 60640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.90

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829214

Amount of Each Receipt this Period

37.38

C. Full Name (Last, First, Middle Initial)
GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code
ATLANTIC BEACH FL 32233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.35

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790372

Amount of Each Receipt this Period

35.78

SUBTOTAL of Receipts This Page (optional)

110.54

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial) GARY S STERE Mailing Address 2015 SELVA MADERA COURT City ATLANTIC BEACH State FL Zip Code 32233 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Home Office Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 387.13		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 6 Transaction ID: A2006-829229 Amount of Each Receipt this Period 35.78
B. Full Name (Last, First, Middle Initial) CHRISTINE A SULLIVAN Mailing Address 257 BIG TERRA LANE City GURNEE State IL Zip Code 60031 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation AVP PCCSO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.72		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: A2006-790237 Amount of Each Receipt this Period 23.87
C. Full Name (Last, First, Middle Initial) KEVIN T SULLIVAN Mailing Address 221 CARRIAGE HILL CIR City LIBERTYVILLE State IL Zip Code 60048 FEC ID number of contributing federal political committee. C Name of Employer Allstate Insurance Company Occupation Vice President Corporate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 892.25		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 2 / 2 0 0 6 Transaction ID: A2006-790697 Amount of Each Receipt this Period 91.08

SUBTOTAL of Receipts This Page (optional)

150.73

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CHRISTINE A SULLIVAN

Mailing Address 257 BIG TERRA LANE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP PCCSO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.59

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829094

Amount of Each Receipt this Period

23.87

B. Full Name (Last, First, Middle Initial)
KEVIN T SULLIVAN

Mailing Address 221 CARRIAGE HILL CIR

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Corporate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.33

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829552

Amount of Each Receipt this Period

91.08

C. Full Name (Last, First, Middle Initial)
KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Enterprise Applicatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790436

Amount of Each Receipt this Period

48.97

SUBTOTAL of Receipts This Page (optional)

163.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 185 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Enterprise Applicatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.27

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829293

Amount of Each Receipt this Period

48.97

B. Full Name (Last, First, Middle Initial)
CASEY J SYLLA

Mailing Address 32 RIDERWOOD

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
President Allstate Financ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1370.53

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790615

Amount of Each Receipt this Period

140.77

C. Full Name (Last, First, Middle Initial)
CASEY J SYLLA

Mailing Address 32 RIDERWOOD

City State Zip Code
BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
President Allstate Financ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1511.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829471

Amount of Each Receipt this Period

140.77

SUBTOTAL of Receipts This Page (optional)

330.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 186 / 228

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JERROLD S SZOSTAK

Mailing Address 1064 W GLENN TRAIL

City State Zip Code
 ELK GROVE IL 60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.30

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790488

Amount of Each Receipt this Period

36.51

Full Name (Last, First, Middle Initial)

B. JERROLD S SZOSTAK

Mailing Address 1064 W GLENN TRAIL

City State Zip Code
 ELK GROVE IL 60007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Reserve Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.81

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829345

Amount of Each Receipt this Period

36.51

Full Name (Last, First, Middle Initial)

C. BENJAMIN A TARVER

Mailing Address 2495 EMERALD LANE

City State Zip Code
 LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Corporate Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.48

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790294

Amount of Each Receipt this Period

20.85

SUBTOTAL of Receipts This Page (optional)

93.87

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 BENJAMIN A TARVER
 Mailing Address 2495 EMERALD LANE

City State Zip Code
 LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Corporate Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.33

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829151

Amount of Each Receipt this Period

20.85

B. Full Name (Last, First, Middle Initial)
 W. J THOMPSON
 Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.40

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790354

Amount of Each Receipt this Period

30.05

C. Full Name (Last, First, Middle Initial)
 MARK L THOMPSON
 Mailing Address 3233 N RACINE #2

City State Zip Code
 CHICAGO IL 60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP-PRODUCT NON-STANDARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.21

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790680

Amount of Each Receipt this Period

23.95

SUBTOTAL of Receipts This Page (optional)

74.85

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
W. J THOMPSON

Mailing Address 1734 SHOAL CREEK TERRACE

City State Zip Code
VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.45

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829211

Amount of Each Receipt this Period

30.05

B. Full Name (Last, First, Middle Initial)
MARK L THOMPSON

Mailing Address 3233 N RACINE #2

City State Zip Code
CHICAGO IL 60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP-PRODUCT NON-STANDARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.16

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829535

Amount of Each Receipt this Period

23.95

C. Full Name (Last, First, Middle Initial)
ROBERT J TIERNEY

Mailing Address 6628 RFD-CARRIAGE WAY

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Procurement Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829311

Amount of Each Receipt this Period

19.88

SUBTOTAL of Receipts This Page (optional)

73.88

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

LOREE E TOEDMAN

Mailing Address 21949 HICKORY HILL DR.

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP ENCOMPASS FIELD DISTR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.38

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790699

Amount of Each Receipt this Period

37.03

B. Full Name (Last, First, Middle Initial)

LOREE E TOEDMAN

Mailing Address 21949 HICKORY HILL DR.

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP ENCOMPASS FIELD DISTR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.41

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829554

Amount of Each Receipt this Period

37.03

C. Full Name (Last, First, Middle Initial)

ROBERT E TRANSON

Mailing Address 2644 N DOUGLAS

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Strategic Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.65

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790506

Amount of Each Receipt this Period

26.32

SUBTOTAL of Receipts This Page (optional)

100.38

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 190 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
ROBERT E TRANSON

Mailing Address 2644 N DOUGLAS

City	State	Zip Code
ARLINGTON HTS	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Strategic Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829363

Amount of Each Receipt this Period

26.32

B. Full Name (Last, First, Middle Initial)
MICHAEL J TREVINO

Mailing Address 1840 N. SAINT ANDREW DR.

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790668

Amount of Each Receipt this Period

30.46

C. Full Name (Last, First, Middle Initial)
MICHAEL J TREVINO

Mailing Address 1840 N. SAINT ANDREW DR.

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Communication Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.51

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829523

Amount of Each Receipt this Period

30.46

SUBTOTAL of Receipts This Page (optional)

87.24

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOSEPH V TRIPODI

Mailing Address 565 E DEERPATH RD

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

968.08

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790730

Amount of Each Receipt this Period

99.23

Full Name (Last, First, Middle Initial)

B. JOSEPH V TRIPODI

Mailing Address 565 E DEERPATH RD

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1067.31

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829585

Amount of Each Receipt this Period

99.23

Full Name (Last, First, Middle Initial)

C. MELINDA S TUNNER

Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code
 LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.57

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790652

Amount of Each Receipt this Period

42.70

SUBTOTAL of Receipts This Page (optional)

241.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MELINDA S TUNNER
Mailing Address 5430 TALL OAKS DRIVE

City State Zip Code
LONG GROVE IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Agency Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.27

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829508

Amount of Each Receipt this Period

42.70

B. Full Name (Last, First, Middle Initial)
DAVID J UNROE
Mailing Address 326 ELM CT.

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Field Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829578

Amount of Each Receipt this Period

19.88

C. Full Name (Last, First, Middle Initial)
WILLIAM A VAINISI
Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.79

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790514

Amount of Each Receipt this Period

47.10

SUBTOTAL of Receipts This Page (optional)

109.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 WILLIAM A VAINISI
 Mailing Address 636 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Ast General Counsel &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.89

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829371

Amount of Each Receipt this Period

47.10

B. Full Name (Last, First, Middle Initial)
 KIMBERLY VAN NOSTERN
 Mailing Address 660 PRESTWICK LANE #205

City State Zip Code
 WHEELING IL 60090

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Information Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.86

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790725

Amount of Each Receipt this Period

23.60

C. Full Name (Last, First, Middle Initial)
 KIMBERLY VAN NOSTERN
 Mailing Address 660 PRESTWICK LANE #205

City State Zip Code
 WHEELING IL 60090

FEC ID number of contributing federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
AVP Information Security

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.46

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829580

Amount of Each Receipt this Period

23.60

SUBTOTAL of Receipts This Page (optional)

94.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.45

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790435

Amount of Each Receipt this Period

32.70

Full Name (Last, First, Middle Initial)

B. WILLIAM P VANDERBORG

Mailing Address 561 W CROOKED STICK CT

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.15

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829292

Amount of Each Receipt this Period

32.70

Full Name (Last, First, Middle Initial)

C. PATRICIA C VANLAMMEREN

Mailing Address 9868 PALACE GREEN WAY

City State Zip Code
 VIENNA VA 22181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.93

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790694

Amount of Each Receipt this Period

51.82

SUBTOTAL of Receipts This Page (optional)

117.22

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 228

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
PATRICIA C VANLAMMEREN

Mailing Address 9868 PALACE GREEN WAY

City State Zip Code
VIENNA VA 22181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.75

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829549

Amount of Each Receipt this Period

51.82

B. Full Name (Last, First, Middle Initial)
RICHARD VAVRA

Mailing Address 2514 S WESLEY AVENUE

City State Zip Code
BERWYN IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.75

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790428

Amount of Each Receipt this Period

37.52

C. Full Name (Last, First, Middle Initial)
RICHARD VAVRA

Mailing Address 2514 S WESLEY AVENUE

City State Zip Code
BERWYN IL 60402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.27

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829285

Amount of Each Receipt this Period

37.52

SUBTOTAL of Receipts This Page (optional)

126.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MICHAEL J VELOTTA
Mailing Address 1111 LOYOLA DR

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Sec & Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.64

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790653

Amount of Each Receipt this Period

74.22

B. Full Name (Last, First, Middle Initial)
MICHAEL J VELOTTA
Mailing Address 1111 LOYOLA DR

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Sec & Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.86

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829509

Amount of Each Receipt this Period

74.22

C. Full Name (Last, First, Middle Initial)
STEVEN C VERNEY
Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Treasure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.66

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790289

Amount of Each Receipt this Period

64.83

SUBTOTAL of Receipts This Page (optional)

213.27

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN C VERNEY

Mailing Address 37144 FOX HILL DR

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President & Treasure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.49

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829146

Amount of Each Receipt this Period

64.83

Full Name (Last, First, Middle Initial)

B. MICHELLE K VIETH

Mailing Address 1731 PORTSMITH

City State Zip Code
ARLINGTON HGTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Bank Cash Management Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.68

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829346

Amount of Each Receipt this Period

19.88

Full Name (Last, First, Middle Initial)

C. MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City State Zip Code
CLOVIS CA 93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790395

Amount of Each Receipt this Period

28.43

SUBTOTAL of Receipts This Page (optional)

113.14

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
MADELINE J WALKER

Mailing Address 5140 N SAN JUAN AVE

City State Zip Code
CLOVIS CA 93611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829252

Amount of Each Receipt this Period

28.43

B. Full Name (Last, First, Middle Initial)
ANTON WANDERON

Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
DIRECTOR CREDIT DEPARTMEN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790371

Amount of Each Receipt this Period

48.47

C. Full Name (Last, First, Middle Initial)
ANTON WANDERON

Mailing Address 112 BRISTOL PLACE

City State Zip Code
PONTE VEDRA FL 32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
DIRECTOR CREDIT DEPARTMEN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.17

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829228

Amount of Each Receipt this Period

48.47

SUBTOTAL of Receipts This Page (optional)

125.37

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS M WARDEN

Mailing Address 146 LA GRANDE

City State Zip Code
MOSS BEACH CA 94038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Research Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.79

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790387

Amount of Each Receipt this Period

30.69

Full Name (Last, First, Middle Initial)

B. THOMAS M WARDEN

Mailing Address 146 LA GRANDE

City State Zip Code
MOSS BEACH CA 94038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Research Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.48

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829244

Amount of Each Receipt this Period

30.69

Full Name (Last, First, Middle Initial)

C. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790589

Amount of Each Receipt this Period

33.09

SUBTOTAL of Receipts This Page (optional)

94.47

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
EDWIN L WASINGER JR
Mailing Address 6245 MURIFIELD DRIVE

City State Zip Code
GURNEE IL 60031

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claim Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.59

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829445

Amount of Each Receipt this Period

33.09

B. Full Name (Last, First, Middle Initial)
DOUGLAS B WELCH
Mailing Address 1724 INDEPENDENCE AVE

City State Zip Code
GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.17

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790416

Amount of Each Receipt this Period

53.15

C. Full Name (Last, First, Middle Initial)
DOUGLAS B WELCH
Mailing Address 1724 INDEPENDENCE AVE

City State Zip Code
GLENVIEW IL 60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.32

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829273

Amount of Each Receipt this Period

53.15

SUBTOTAL of Receipts This Page (optional)

139.39

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Operations M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.43

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790682

Amount of Each Receipt this Period

30.43

Full Name (Last, First, Middle Initial)

B. JONATHAN J WELLS

Mailing Address 5394 W RIVER BEND DRIVE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior Field Operations M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.86

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829537

Amount of Each Receipt this Period

30.43

Full Name (Last, First, Middle Initial)

C. ROBERT J WHITE

Mailing Address 909 STILLWATER COURT

City State Zip Code
 WESTON FL 33327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.90

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790310

Amount of Each Receipt this Period

32.69

SUBTOTAL of Receipts This Page (optional)

93.55

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)

ROBERT J WHITE

Mailing Address 909 STILLWATER COURT

City State Zip Code
 WESTON FL 33327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Territorial Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.59

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829167

Amount of Each Receipt this Period

32.69

B. Full Name (Last, First, Middle Initial)

SAMUEL W WHITEMAN

Mailing Address 120 NE STONELEDGE PLACE

City State Zip Code
 LEEsburg VA 20176

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.38

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790669

Amount of Each Receipt this Period

29.58

C. Full Name (Last, First, Middle Initial)

SAMUEL W WHITEMAN

Mailing Address 120 NE STONELEDGE PLACE

City State Zip Code
 LEEsburg VA 20176

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Marketing Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.96

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829524

Amount of Each Receipt this Period

29.58

SUBTOTAL of Receipts This Page (optional)

91.85

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
CYNTHIA A WHITFIELD
Mailing Address 135 CAMBRIDGE DR.

City State Zip Code
AURORA OH 44202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Risk Management Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.05

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829150

Amount of Each Receipt this Period

16.35

B. Full Name (Last, First, Middle Initial)
CYNTHIA R WHITLEY
Mailing Address 6722 NEW HAMPSHIRE TRAIL

City State Zip Code
CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790356

Amount of Each Receipt this Period

35.80

C. Full Name (Last, First, Middle Initial)
CYNTHIA R WHITLEY
Mailing Address 6722 NEW HAMPSHIRE TRAIL

City State Zip Code
CRYSTAL LAKE IL 60012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.30

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829213

Amount of Each Receipt this Period

35.80

SUBTOTAL of Receipts This Page (optional)

87.95

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 204 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 ROB WHOLF
 Mailing Address 847 INTERLAKEN DRIVE

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.90

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790403

Amount of Each Receipt this Period

21.79

B. Full Name (Last, First, Middle Initial)
 ROB WHOLF
 Mailing Address 847 INTERLAKEN DRIVE

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims Senior Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.69

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829260

Amount of Each Receipt this Period

21.79

C. Full Name (Last, First, Middle Initial)
 JOHN K WILCOX
 Mailing Address 1120 JESSICA LANE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.15

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790453

Amount of Each Receipt this Period

30.33

SUBTOTAL of Receipts This Page (optional)

73.91

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City State Zip Code
LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Product Operations Direct

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829310

Amount of Each Receipt this Period

30.33

B. Full Name (Last, First, Middle Initial)
ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	6

Transaction ID: A2006-790700

Amount of Each Receipt this Period

37.23

C. Full Name (Last, First, Middle Initial)
ANISE D WILEY-LITTLE

Mailing Address 21030 W YORKSHIRE DR

City State Zip Code
KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
Human Resource Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	6

Transaction ID: A2006-829555

Amount of Each Receipt this Period

37.23

SUBTOTAL of Receipts This Page (optional)

104.79

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 206 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City	State	Zip Code
CLARKSVILLE	MD	21029

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

Transaction ID: A2006-790495

Amount of Each Receipt this Period

37.35

Full Name (Last, First, Middle Initial)

B. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City	State	Zip Code
CLARKSVILLE	MD	21029

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	6	/	2	0	0	6

Transaction ID: A2006-829352

Amount of Each Receipt this Period

37.35

Full Name (Last, First, Middle Initial)

C. THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City	State	Zip Code
CHICAGO	IL	60614

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
President & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1870.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

Transaction ID: A2006-790613

Amount of Each Receipt this Period

192.69

SUBTOTAL of Receipts This Page (optional)

267.39

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 / 228

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City	State	Zip Code
CHICAGO	IL	60614

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
President & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2063.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	6	/	2	0	0	6

Transaction ID: A2006-829469

Amount of Each Receipt this Period

192.69

Full Name (Last, First, Middle Initial)

B. DORETHA M WILSON-JOHNSON

Mailing Address 3902 BLACKSTONE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	6

Transaction ID: A2006-790636

Amount of Each Receipt this Period

62.04

Full Name (Last, First, Middle Initial)

C. DORETHA M WILSON-JOHNSON

Mailing Address 3902 BLACKSTONE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.**C**Name of Employer
Allstate Insurance CompanyOccupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

671.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	6	/	2	0	0	6

Transaction ID: A2006-829492

Amount of Each Receipt this Period

62.04

SUBTOTAL of Receipts This Page (optional)

316.77

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
BRUCE A WOIKE
Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.65

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790578

Amount of Each Receipt this Period

19.88

B. Full Name (Last, First, Middle Initial)
BRUCE A WOIKE
Mailing Address 1318 N. CHESTNUT AVE.

City State Zip Code
ARLINGTON HTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Accounting Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.53

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829434

Amount of Each Receipt this Period

19.88

C. Full Name (Last, First, Middle Initial)
RHONDA WOODARD
Mailing Address 2341 MARCY AVENUE

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRODUCT DELIVERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790691

Amount of Each Receipt this Period

34.21

SUBTOTAL of Receipts This Page (optional)

73.97

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
RHONDA WOODARD
Mailing Address 2341 MARCY AVENUE

City State Zip Code
EVANSTON IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRODUCT DELIVERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.31

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829546

Amount of Each Receipt this Period

34.21

B. Full Name (Last, First, Middle Initial)
DONALD F WYATT JR
Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.05

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790458

Amount of Each Receipt this Period

33.35

C. Full Name (Last, First, Middle Initial)
DONALD F WYATT JR
Mailing Address 811 DRESSER DR.

City State Zip Code
MT PROSPECT IL 60056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.40

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829315

Amount of Each Receipt this Period

33.35

SUBTOTAL of Receipts This Page (optional)

100.91

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
FLOYD M YAGER
Mailing Address 1610 BIRCH LANE

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.45

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790537

Amount of Each Receipt this Period

45.25

B. Full Name (Last, First, Middle Initial)
FLOYD M YAGER
Mailing Address 1610 BIRCH LANE

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Assistant Field Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.70

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829393

Amount of Each Receipt this Period

45.25

C. Full Name (Last, First, Middle Initial)
JERRY B YELVERTON
Mailing Address 300 W WOODLAND

City State Zip Code
CARY IL 60013

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
CC IT Systems Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.71

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829599

Amount of Each Receipt this Period

19.61

SUBTOTAL of Receipts This Page (optional)

110.11

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 211 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
LORI J YELVINGTON
Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
ARLINGTON HGTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.24

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790545

Amount of Each Receipt this Period

43.86

B. Full Name (Last, First, Middle Initial)
LORI J YELVINGTON
Mailing Address 1531 N HIGHLAND AVE

City State Zip Code
ARLINGTON HGTS. IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.10

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829401

Amount of Each Receipt this Period

43.86

C. Full Name (Last, First, Middle Initial)
RICHARD P YOCIUS
Mailing Address 40135 N GOLDENROD

City State Zip Code
WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.60

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790460

Amount of Each Receipt this Period

39.76

SUBTOTAL of Receipts This Page (optional)

127.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 212 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
 RICHARD P YOCIUS
 Mailing Address 40135 N GOLDENROD

City State Zip Code
 WADSWORTH IL 60083

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 Senior State Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.36

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829317

Amount of Each Receipt this Period

39.76

B. Full Name (Last, First, Middle Initial)
 RICHARD M ZAHARIAS
 Mailing Address 1439 STEVENSON DRIVE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Allstate Life Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.89

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790634

Amount of Each Receipt this Period

62.87

C. Full Name (Last, First, Middle Initial)
 RICHARD M ZAHARIAS
 Mailing Address 1439 STEVENSON DRIVE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 AVP Allstate Life Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.76

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829490

Amount of Each Receipt this Period

62.87

SUBTOTAL of Receipts This Page (optional)

165.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES P ZILS

Mailing Address 832 PADDOCK LANE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Investment Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.32

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790670

Amount of Each Receipt this Period

36.34

Full Name (Last, First, Middle Initial)

B. JAMES P ZILS

Mailing Address 832 PADDOCK LANE

City State Zip Code
 LIBERTYVILLE IL 60048

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP Investment Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.66

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829525

Amount of Each Receipt this Period

36.34

Full Name (Last, First, Middle Initial)

C. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City State Zip Code
 AURORA IL 60502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790623

Amount of Each Receipt this Period

34.50

SUBTOTAL of Receipts This Page (optional)

107.18

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 / 228

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City State Zip Code
AURORA IL 60502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Home Office Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829479

Amount of Each Receipt this Period

34.50

B. Full Name (Last, First, Middle Initial)
J K ZUZICH

Mailing Address 1125 ACORN TRAIL

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP HR People Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.77

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 2 / 2 0 0 6

Transaction ID: A2006-790688

Amount of Each Receipt this Period

33.78

C. Full Name (Last, First, Middle Initial)
J K ZUZICH

Mailing Address 1125 ACORN TRAIL

City State Zip Code
LAKE FOREST IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
AVP HR People Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.55

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 6

Transaction ID: A2006-829543

Amount of Each Receipt this Period

33.78

SUBTOTAL of Receipts This Page (optional)

102.06

TOTAL This Period (last page this line number only)

24838.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 228

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

A. Full Name (Last, First, Middle Initial)
Friends of Jon Amores

Mailing Address 914 Chester Road

City State Zip Code
 Charleston WV 25302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 5 / 1 8 / 2 0 0 6

Transaction ID: A5428

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 216 / 228

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst State IL Zip Code 60062

Purpose of Disbursement

Bank Service Charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: IL

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B142499

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

145.09

Full Name (Last, First, Middle Initial)

B. Fifth Third Bank

Mailing Address 346 West Carol Lane

City Elmhurst State IL Zip Code 60062

Purpose of Disbursement

Bank Service Charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: IL

District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

Transaction ID: B142500

Date of Disbursement

05 / 11 / 2006

Amount of Each Disbursement this Period

0.05

SUBTOTAL of Disbursements This Page (optional)

145.14

TOTAL This Period (last page this line number only)

145.14

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 217 / 228

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jim Ramstad Volunteer Committee

Mailing Address 1809 Plymouth Road South #310 B

City State Zip Code
Minnetonka MN 55305

Purpose of Disbursement
P-2006 U.S. House 03 MN

Candidate Name
Jim Ramstad

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 03

Transaction ID: B140710

Date of Disbursement

05 / 02 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Brian Bilbray for Congress

Mailing Address PO Box 455

City State Zip Code
Rancho Santa Fe CA 92067

Purpose of Disbursement
O-2006 U.S. House 50 CA

Candidate Name
Brian P Bilbray

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: CA District: 50

Special

Transaction ID: B140899

Date of Disbursement

05 / 04 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Lee Terry for Congress

Mailing Address P. O. Box 540098

City State Zip Code
Omaha NE 68154

Purpose of Disbursement
G-2006 U.S. House 02 NE

Candidate Name
Lee R Terry

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: NE District: 02

Transaction ID: B141119

Date of Disbursement

05 / 09 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Davis for Congress

Mailing Address PO Box 2842

City
Washington

State
DC

Zip Code
20013

Purpose of Disbursement
G-2006 U.S. House 07 IL

Candidate Name
Danny K Davis

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 07

Transaction ID: B141644

Date of Disbursement

05 / 22 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jerry Weller for Congress Inc.

Mailing Address 1155 21st Street NW Suite 330

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
G-2006 U.S. House 11 IL

Candidate Name
Gerald C Weller

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 11

Transaction ID: B141645

Date of Disbursement

05 / 22 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Roskam for Congress Cmte

Mailing Address P.O. Box 713

City
Wheaton

State
IL

Zip Code
60189

Purpose of Disbursement
G-2006 U.S. House 06 IL

Candidate Name
Peter Roskam

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 06

Transaction ID: B142016

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Clay Shaw

Mailing Address P.O. Box 2188

City
Fort Lauderdale

State
FL

Zip Code
33303

Purpose of Disbursement
P-2006 U.S. House 22 FL

Candidate Name
E. C Shaw

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 22

Transaction ID: B142017

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Reynolds for Congress

Mailing Address P.O. Box 15388

City
Rochester

State
NY

Zip Code
14615

Purpose of Disbursement
P-2006 U.S. House 26 NY

Candidate Name
Thomas M Reynolds

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 26

Transaction ID: B142013

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

8000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 220 / 228

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Lake County Republican Federation

Mailing Address 320 Peterson Road

City State Zip Code
Libertyville IL 60048

Purpose of Disbursement
O-2006 Co. Multi-cand. Party Cmte

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☐ General
☒ Other (specify) ▼
State: IL District: Not Applicable

Transaction ID: B141120

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Ken Dunkin

Mailing Address P.O. Box 16802

City State Zip Code
Chicago IL 60616

Purpose of Disbursement
G-2006 State House 05 IL

Candidate Name
Kenneth Dunkin

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼
State: IL District: 05

Transaction ID: B141121

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Citizens for Cullerton

Mailing Address 4004 Old Mill Lane

City State Zip Code
Springfield IL 62707

Purpose of Disbursement
G-2006 State Senate 06 IL

Candidate Name
John J Cullerton

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2006 ☐ Primary ☒ General
☐ Other (specify) ▼
State: IL District: 06

Transaction ID: B141122

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 221 / 228

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Illinois Rep. State Senate Camp. Cmte.

Mailing Address P.O. Box 3422

City
Springfield

State
IL

Zip Code
62708

Purpose of Disbursement
O-2006 State Multi-cand. Party Cmte IL

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: IL District:

Not Applicable

Transaction ID: B141123

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Dianne Harman ID# 1270694

Mailing Address 22032 Capistrano Lane

City
Huntington Beach

State
CA

Zip Code
92646

Purpose of Disbursement
P-2006 State House 67 CA

Candidate Name
Dianne Harman

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 67

Transaction ID: B141124

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Parra for Assembly 2006 ID# 1272655

Mailing Address 2005 N Street

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
P-2006 State House 30 CA

Candidate Name
Nicole M. Parra

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 30

Transaction ID: B141125

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Bonnie Garcia ID# 1272722

Mailing Address P.O. Box 471

City
Sacramento

State
CA

Zip Code
95812

Purpose of Disbursement
P-2006 State House 80 CA

Candidate Name
Bonnie Garcia

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 80

Transaction ID: B141265

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1800.00

Full Name (Last, First, Middle Initial)

B. Pedro Nava 2006 ID#1272474

Mailing Address 1005 12th Street Suite H

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
P-2006 State House 35 CA

Candidate Name
Pedro Nava

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 35

Transaction ID: B141269

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends for Mike Ripley

Mailing Address 234 Clover Lane

City
Monroe

State
IN

Zip Code
46772

Purpose of Disbursement
G-2006 State House 79 IN

Candidate Name
Michael Ripley

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 79

Transaction ID: B141271

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

3550.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Ted Lieu for Assembly 2006 ID#1280888

Mailing Address 1100 O Street Suite 200

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
P-2006 State House 53 CA

Candidate Name
Ted Lieu

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 53

Transaction ID: B141463

Date of Disbursement

05 / 17 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Bob Dutton State Senate 2008 ID#1272833

Mailing Address P.O. Box 1565

City Oakdale State CA Zip Code 95361

Purpose of Disbursement
P-2008 State Senate 31 CA

Candidate Name
Bob Dutton

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 31

Transaction ID: B141464

Date of Disbursement

05 / 17 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mark Wyland for Senate ID#1253967

Mailing Address P.O. Box 1565

City Oakdale State CA Zip Code 95361

Purpose of Disbursement
P-2006 State Senate 38 CA

Candidate Name
Mark Wyland

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 38

Transaction ID: B141465

Date of Disbursement

05 / 17 / 2006

Amount of Each Disbursement this Period

1250.00

SUBTOTAL of Disbursements This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Benoit for Assembly 2006 ID# 1273003

Mailing Address 7111 Bettola Place

City Alta Loma State CA Zip Code 91701

Purpose of Disbursement
G-2006 State House 64 CA

Candidate Name
John J Benoit

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 64

Transaction ID: B141466

Date of Disbursement

05 / 17 / 2006

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

B. Nakanishi for Assembly 2006 ID# 1272371

Mailing Address PO Box 471

City Sacramento State CA Zip Code 95812

Purpose of Disbursement
P-2006 State House 10 CA

Candidate Name
Alan Nakanishi

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Transaction ID: B141467

Date of Disbursement

05 / 17 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Wolk for Assembly 2006 ID# 1272182

Mailing Address 1005 12th St. Suite H

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
P-2006 State House 08 CA

Candidate Name
Lois Wolk

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 08

Transaction ID: B141468

Date of Disbursement

05 / 17 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2700.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Dennis Mountjoy State Senate ID#1273026

Mailing Address P.O. Box 877

City
Monorovia

State
CA

Zip Code
91017

Purpose of Disbursement
P-2008 State Senate 29 CA

Candidate Name
Dennis L Mountjoy

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 29

Transaction ID: B141471

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1300.00

Full Name (Last, First, Middle Initial)

B. Friends of John J. Millner

Mailing Address PO Box 88801

City
Carol Stream

State
IL

Zip Code
60188

Purpose of Disbursement
G-2006 State Senate 28 IL

Candidate Name
John J Millner

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 28

Transaction ID: B141472

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Citizens for a Better Nebraska

Mailing Address PO Box 83561

City
Lincoln

State
NE

Zip Code
68501

Purpose of Disbursement
O-2006 State Multi-cand. PAC NE

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: NE District:

Not Applicable

Transaction ID: B141646

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Jim Raussen

Mailing Address 661 Park Avenue

City
Cincinnati

State
OH

Zip Code
45246

Purpose of Disbursement
G-2006 State House 28 OH

Candidate Name
Jim Raussen

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 28

Transaction ID: B142014

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Batchelder for Representative Cmte.

Mailing Address 105 W. Liberty Street

City
Medina

State
OH

Zip Code
44256

Purpose of Disbursement
G-2006 State House 69 OH

Candidate Name
William G Batchelder

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 69

Transaction ID: B142015

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Craig Fry for State Rep.

Mailing Address PO Box 4456

City
South Bend

State
IN

Zip Code
46634

Purpose of Disbursement
G-2006 State House 05 IN

Candidate Name
Craig Fry

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 05

Transaction ID: B142021

Date of Disbursement

05 / 30 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Tom Harman For Senate 2006 ID#1282381

Mailing Address 22032 Capistrano Lane

City
Huntington Beach

State
CA

Zip Code
92646

Purpose of Disbursement
O-2006 State Senate 35 CA

Candidate Name
Tom Harman

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼
Special General

State: CA District: 35

Transaction ID: B142018

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

21300.00

Form/Schedule: **SA11A1**

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.
